



# Application for Permit

## Canvassers, Solicitors, Peddlers, Itinerant Merchants

**Fees:**

<i>Permit</i>	\$50.00 Annually
<i>Background Check</i>	\$32.00 Each Person

---

### Primary Selling Agent's Information

---

**Name:** \_\_\_\_\_  
First
Last
Middle Name

**Date of Birth:** \_\_\_\_\_ **Social Security No.:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_  
Street  
 \_\_\_\_\_  
City
State
Zip

**Home Phone No.:** \_\_\_\_\_ **Cell Phone No.:** \_\_\_\_\_

---

### Business Information

---

**Business Name:** \_\_\_\_\_

**Sales Tax Number:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_  Profit  Not-For-Profit

**Type of Services/Goods/Products to be Sold:** \_\_\_\_\_  
 \_\_\_\_\_

**Business Address:** \_\_\_\_\_  
Street  
 \_\_\_\_\_  
City
State
Zip

**How Long in Business:** \_\_\_\_\_ **Supervisor's Name:** \_\_\_\_\_

**Business Phone No.:** \_\_\_\_\_

**Dates Soliciting:** \_\_\_\_\_  
Start
Finish

**Method & Time of Solicitation:**  
*Check all that apply.*

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Door-to-Door         | What hours? _____                    |
| <input type="checkbox"/> Public Property      | <i>Special Permit Required</i> _____ |
| <input type="checkbox"/> Selling from Vehicle | What hours? _____                    |
| <input type="checkbox"/> Other                | Where? _____                         |
-

---

**Additional Information (Required)**

---

Have you ever been denied or had revoked a permit of this nature?  Yes  No  
Will you receive payment or partial payment when you solicit?  Yes  No  
Will a written contract be involved at any time between you, the company, and the customer?  Yes  No

Who will deliver the product or services? \_\_\_\_\_

Length of time for delivery? \_\_\_\_\_

Will you operate a vehicle in the community during business?  Yes  No

Have you ever been convicted of a crime, other than a minor traffic violation?  Yes  No

If yes, please explain: \_\_\_\_\_

Do you have a valid drivers license?  Yes  No

Drivers License No.: \_\_\_\_\_ State Issued: \_\_\_\_\_

Make & Model of Vehicle: \_\_\_\_\_

\_\_\_\_\_ Color \_\_\_\_\_ Year

---

**Secondary Selling Agents' Information**

---

Name: \_\_\_\_\_  
First Last Middle Name

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Drivers License No.: \_\_\_\_\_ State Issued: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_

Name: \_\_\_\_\_  
First Last Middle Name

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Drivers License No.: \_\_\_\_\_ State Issued: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_

Name: \_\_\_\_\_  
First Last Middle Name

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Drivers License No.: \_\_\_\_\_ State Issued: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_

---