

# \$25.00 Fee

DATE \_\_\_\_\_

LICENSE # \_\_\_\_\_

PER ORDINANCE 850.03 THE INVESTIGATION PROCESS MAY INCLUDE A THREE-DAY WAITING PERIOD.

## CITY OF NEW CARLISLE APPLICATION FOR CANVASSING, SOLICITING & PEDDLING

NAME \_\_\_\_\_ AGE \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ SSN \_\_\_\_\_

SEX \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ HAIR COLOR \_\_\_\_\_

EYE COLOR \_\_\_\_\_ PERMANENT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME OR CELL # \_\_\_\_\_ WORK # \_\_\_\_\_

PROPOSED DATES, LOCATION & TIMES \_\_\_\_\_

### VEHICLE INFORMATION

VEHICLE MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_

COLOR \_\_\_\_\_ LICENSE PLATE # \_\_\_\_\_ STATE \_\_\_\_\_

### BUSINESS INFORMATION

BUSINESS NAME \_\_\_\_\_ BUSINESS PHONE # \_\_\_\_\_

NAME OF SUPERVISOR \_\_\_\_\_

SUPERVISOR DIRECT PHONE # \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DESCRIPTION OF PRODUCT \_\_\_\_\_

MUNICIPALITIES IN THE LAST 6 MONTHS THAT YOU HAVE CONDUCTED CANVASSING,  
SOLICITING OR PEDDLING

\_\_\_\_\_

DESCRIBE THE NATURE OF GOODS/SERVICES TO BE FURNISHED, OR THE PURPOSE FOR THE SOLICITATION \_\_\_\_\_

WHAT, IF ANY, ADVERTISING WILL YOU BE DOING?

\_\_\_\_\_  
\*COPY OF ADVERTISING IS TO BE SUBMITTED WITH APPLICATION

HAVE YOU EVER HAD A PERMIT OR LICENSE REVOKED? \_\_\_\_\_

IF SO, LOCATION \_\_\_\_\_ DATE \_\_\_\_\_

FOR OFFICE USE ONLY:			
Date Received:	Date Approved:	Amount Received:	Receipt No:
Approved By:			
Title:		Date:	