

APPLICATION
FOR
CANVASSING, SOLICITING & PEDDLING

NAME _____ AGE _____ BIRTHDAY ____/____/____

DRIVER'S LICENSE _____ SS NUMBER _____

SEX _____ HEIGHT _____ WEIGHT _____ HAIR COLOR _____ EYE COLOR _____

PERMANENT ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME NUMBER (____) _____ WORK NUMBER (____) _____

COMPANY NAME _____ CONTACT PERSON _____

ADDRESS _____

DESCRIPTION OF PRODUCTS: _____

MUNICIPALITIES THAT YOU HAVE CONDUCTED CANVASSING, SOLICITING, OR PEDDLING
(LAST 12 MONTHS)

HAVE YOU EVER HAD A PERMIT REVOKED? _____ DATE _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY VIOLATION OR A MISDEMEANOR
VIOLATION INVOLVING MORAL TURPITUDE? _____ DATE _____

LOCATION _____

PROPOSED DATES & TIMES _____

IS THIS APPLICATION FOR A WEEK, MONTH OR YEAR? _____

AUTOMOBILE THAT WILL USED DURING YOUR SOLICITING/ PEDDLING IN THE VILLAGE
OF ENON

MAKE _____ MODEL _____

YEAR _____ COLOR _____

LICENSE PLATE # _____

PLEASE SUBMIT 2 PHOTOGRAPHS (APPROXIMATELY 2 X 2)