



APPLICATION FOR SOLICITORS PERMIT

Date of application: _____ Duration requested: 1 day 1 wk. 1 mo. Seasonal

Name of Business/Non-Profit Organization: _____

Please check any that apply: 501(c)(3) School Organization Tax ID# _____

Business Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

Immediate Supervisor: _____ Phone #: _____

Item(s) or Product(s) to be sold: _____

INDIVIDUAL SOLICITING

Full Name (First, Middle, Last): _____

Address: _____ City: _____ State: _____ Zip: _____

Date of birth: _____ Phone #: _____

VEHICLE INFORMATION

Make: _____ Model: _____ Color: _____

Plate #: _____ Issuing State: _____

I do hereby acknowledge that all statements contained herein are true and it is my responsibility to abide by all State of Ohio and Village of Reminderville Ordinances regarding Canvassers, Peddlers, and Solicitors, specifically Village of Reminderville Ordinances contained within Chapter 729. I also understand it is my responsibility to abide by a current listing of the Village of Reminderville, OH "Do Not Knock Registry". I understand a violation may be cause, among other penalties, for revocation of my permit.

Signature of applicant: _____ Date: _____

Departmental use only

Background check received: _____ Photo ID Attached: _____ Fee Received: _____ Vehicle Inspected: _____

Approved by: _____ Date of Approval: _____ Permit Expiration Date: _____