CITY OF RILEY

Solicitor Permit Application

Name: _____ Date: _____
Permanent Address: _____ City, State, Zip: _____
Local Address: _____ City, State, Zip: _____
Telephone: _____
Driver's License #: _____ Social Security #: _____
Date of Birth: _____ Male/Female: _____
Eye Color: _____ Weight: _____

Employer Name: _____ Length of Service: _____
Employer Address: _____ City, State, Zip: _____
Employer Telephone: _____
Description of the nature of your business and the goods to be sold or distributed:

_____

_____

Dates Soliciting/Canvassing in the City of _____ to _____

IF A VEHICLE IS TO BE USED IN SOLICITING/CANVASSING, PLEASE COMPLETE THE FOLLOWING:
Vehicle Make/Model: _____ Tag #: _____
Year: _____ Color: _____

PLEASE INITIAL EACH BOX BELOW INDICATING THAT YOU HAVE READ AND UNDERSTAND EACH:
□I swear that I have not been convicted of a felony, misdemeanor, or ordinance violation involving force, violence, moral turpitude, deceit, fraud, or any law regulating the act of soliciting or canvassing as defined by this chapter within the fast five (5) years in this state or any other state or subdivision thereof or of the United States.
□I swear that I have not had a solicitation permit or registration revoked or suspended under the ordinances of the City of Riley or any other City.
□I understand and agree that if this permit is granted, it will not be used or represented in any way as an endorsement of the City of Riley or any department or officer of the City.

A COPY OF A DRIVER'S LICENSE OR A PHOTO IDENTIFICATION CARD (TAKEN WITHIN SIX MONTHS) IS REQUIRED 1 MONTH BEFORE SOLICITING/CANVASSING BEGINS. _____

I SWEAR THAT THE ABOVE IS TRUE AND ACCURATE INFORMATION.

Signature of Applicant: _____ Date: _____

Subscribed and sworn to me before this _____ day of _____, 20___.

My commission expires: _____ Signature of Notary: _____

Seal: