



Clarendon Hills Solicitation/Canvasser License Application

Photo to be placed here

REGISTRATION SHALL BE VALID FOR 30 DAYS FROM THE DATE OF ISSUE.
SOLICITOR MUST CARRY THE SOLICITOR'S PERMIT UPON HIS/HER PERSON.

REQUIRED ATTACHMENTS TO APPLICATION

(Each Individual conducting solicitation must complete a separate form and pay a separate \$50.00 fee)

- NON-REFUNDABLE APPLICATION FEE OF \$50.00** (cash or check-make payable to Village of Clarendon Hills)
- COPY OF APPLICANT'S DRIVERS' LICENSE OR STATE ID**
- COLOR PHOTO** (passport size, this will be used on the solicitors license)
- RESULTS OF BACKGROUND CHECK** Background results must be from IL State Police Bureau of Identification (fingerprints taken by a state-approved Livescan vendor within the last 90 days), with the results submitted to this Police Dept. For authorized vendors see the Illinois State Police website.

COMPANY INFORMATION

COMPANY NAME: _____

(Company that you are employed by and are soliciting on behalf of)

COMPANY STREET ADDRESS INCLUDING CITY, STATE, ZIP CODE: _____

SUPERVISOR'S NAME AND ADDRESS WITHIN THE STATE OF ILLINOIS WHERE SERVICE OF PROCESS MAY BE HAD.

(Person in your company who is in charge of those soliciting on the company's behalf and his/her address)

Name _____

E-Mail _____

Phone _____

APPLICANT INFORMATION

NAME: _____

HOME ADDRESS, CITY, STATE, ZIP CODE: _____

DATE OF BIRTH: _____

APPLICANT'S PHONE NUMBER: _____

1. LIST DATES OF SOLICITATION: (9:00 am to 7:00 pm ONLY. NO SUNDAYS OR HOLIDAYS):

2. WHAT IS THE PRODUCT OR SUBJECT MATTER OF YOUR SOLICITATION?

3. HAVE YOU EVER BEEN CONVICTED OF A VIOLATION OF ANY OF THE PROVISIONS OF CHAPTER 34 OR THE ORDINANCES OF ANY OTHER ILLINOIS MUNICIPALITY'S REGULATION FOR SOLICITATION? _____

4. HAVE YOU EVER BEEN CONVICTED OF THE COMMISSION OF A FELONY UNDER THE LAWS OF THE STATE OF ILLINOIS OR ANY OTHER STATE, OR OF A LAW OF THE UNITED STATES? (Circle) **Yes** or **No**; IF YES, PLEASE LIST THE OFFENSE(S):

I certify that all the above statements are true to the best of my knowledge, information and beliefs. I further certify that I will notify the Village within 24 hours in writing if any change occurs in the information I have provided on this application. If the application is approved, I certify that this applicant will abide by all the rules and regulations in the Village of Clarendon Hills regarding solicitation. Applicant also certifies that he/she is aware that the \$50 application fee will NOT be refunded if application is denied for any reason.

APPLICANT'S SIGNATURE _____

DATE _____

For Clarendon Hills Police Department use only:

APPROVED SIGNATURE: _____
 DENIED DATE: _____

RECEIVED: _____
APPLICANT CONTACTED BY: _____
DATE/TIME: _____