

**Center Township
Police Department**

SOLICITATION PERMIT APPLICATION

Date _____ Time _____

Name _____ Phone _____

Local Address _____

Home Address _____

Age _____ Height _____ Hair _____ Weight _____ Eyes _____ Sex _____ Birthdate _____

Vehicle Make and Model _____ Color _____

Registration Plate _____ State _____

Name of Company or Firm _____ Phone _____

Address _____

Name of Supervisor _____

Address _____

Commodity or Service Sold _____

Was Prior License Ever Issued? Yes _____ No _____

Has Prior Request Ever Been Refused? Yes _____ No _____

Have you ever been convicted of any crime, felony, misdemeanor or violation of any Municipal Ordinance? (other than traffic violation) Yes _____ No _____

If Yes, describe the nature of offense, and the punishment or penalty assessed and date.

Bond: Yes _____ No _____ Amount _____ Renewal Date _____

Signature