

CITY OF NORTH CHICAGO)
STATE OF ILLINOIS) SS

INITIAL FEE \$25.00 (PER DAY/FOR 30 DAYS)
RENEWAL FEE \$10.00 (FOR EVERY 30 DAYS THEREAFTER)

APPLICATION FOR COMMERCIAL SOLICITATION PERMIT

#00 -8

DATE OF APPLICATION | TO WHAT DATE IS APPLICATION REQUESTED | DATE ISSUED | EXPIRATION DATE

NAME | DATE OF BIRTH | SOCIAL SECURITY # | DRIVER'S LICENSE #

PLACE OF RESIDENCE PAST THREE YEARS

FROM	TO	ADDRESS (NUMBER AND STREET)	CITY	STATE	PHONE NUMBER

PHYSICAL DESCRIPTION OF APPLICANT

Sex: _____ Age: _____ Race: _____ Height: _____ Weight: _____

Color of hair: _____ Eye color: _____ Complexion: _____ Mustache: _____

Glasses: _____ Scars or marks: _____

Place of birth: _____

Marital status: Married _____ Single _____ Divorced _____

EMPLOYMENT INFORMATION

Employer's name: _____

Employer's address: _____

Phone Number: _____

Applicant's dates of employment with firm: From: _____ To: _____

Description of goods or services rendered: _____

State license number of auto driven: _____

Has a previous Certificate of Registration been issued by the City of North Chicago: _____

If so, when and for what: _____

Has any certificate of Registration ever been revoked: _____ If so, please explain: _____

Have you ever been convicted of a Violation of any of the Provisions of the Solicitors and Canvassers Ordinance of the City of North Chicago, or of Ordinances of any other Illinois Municipality regulating Solicitors: _____ When: _____ If "yes" please explain: _____

Have you ever been convicted of the Commission of a Felony under the Laws of the State of Illinois, or any other State or Federal Law of the United States: _____ If "yes", when: _____ Please explain: _____

I hereby swear that all of the statements above are true to the best of my knowledge.

SIGNATURE OF APPLICANT

Subscribed and sworn to before me this _____ day of _____, 19__.

NOTARY PUBLIC

OFFICE USE ONLY

Permit period from: _____ To: _____

Permit number: _____ Date issued: _____

Permit approved by: _____ Permit issued by: _____

Itinerant merchants license number: _____

Date of expiration of license: _____

Title 8, Chapter 21
Adopted: 01/21/81