

City of Bay Village
APPLICATION
PEDDLERS & SOLICITORS LICENSE

Name of Applicant _____

Street Address _____

City _____ State _____ Zip Code _____

Social Security No. _____ Age _____

Date of Birth _____ Place of Birth _____

Physical Description: Hgt. _____ Wgt. _____ Hair _____ Eyes _____

Operator's License No. _____ State _____

In case of emergency, notify: _____

Address _____

Phone _____ Employed Since _____

Immediate Supervisor _____ Phone _____

Nature of Goods sold, Services to be Rendered, or Fund Solicited:

Contact Made: (check one) In Person _____ By Phone _____

Vehicle Used _____

State of Registration _____ Lic. No. _____

Previous Addresses:

Dates:

_____	_____
_____	_____
_____	_____
_____	_____

Previous employment during past year:

<u>Name & Address of Employer</u>	<u>Type of Work</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Previous places worked in present position:

<u>City</u>	<u>Date</u>
_____	_____
_____	_____
_____	_____

FOR DEPARTMENT USE ONLY

Photo Attached _____

Date Application Filed _____ Officer _____

Investigation Made By _____ Date _____

Application Approved _____ Date _____

(If application is not approved, use separate sheet to state reasons.)

Appeal Filed _____ Date _____

Fee Received _____ Date _____

City Tax Form Issued and Returned _____

Permit No. _____ Issuing Officer _____

Date Permit Issued _____ Expiration Date _____

Renewal Date _____ Renewal Date _____ Renewal Date _____

Permit Revoked _____ Date _____

Reason _____

_____ By _____

Expired Permit Returned _____