

CITY OF TROY
APPLICATION FOR SOLICITOR'S LICENSE

Troy Municipal Code, Chapter 111, Sections 111.01 through 111.17

LAST NAME _____ FIRST NAME _____ MIDDLE _____

DRIVER'S LICENSE OR STATE ID NO. _____

DATE OF BIRTH _____ MALE FEMALE

ALIAS NAMES _____

TELEPHONE NUMBER _____

PERMANENT RESIDENCE ADDRESS: _____

CURRENT ADDRESS, IF DIFFERENT FROM ABOVE _____

OTHER PERMANENT RESIDENCES (IN THE PAST THREE YEARS):

VEHICLE MAKE/MODEL/YEAR/COLOR

VEHICLE LICENSE PLATE NUMBER/ISSUING STATE

VEHICLE IDENTIFICATION (VIN) NUMBER

COMPANY NAME

TYPE OF SALES _____ LENGTH OF EMPLOYMENT _____

COMPANY ADDRESS: _____

COMPANY E-MAIL ADDRESS: _____

SUPERVISOR'S NAME _____ PHONE # _____

NAME AND ADDRESS OF EMPLOYER(S) DURING THE LAST THREE YEARS, (OTHER THAN CURRENT EMPLOYER)

WILL PAYMENT FOR GOODS OR SERVICES BE RECEIVED AT TIME OF SOLICITATION?: YES NO

WILL A PAYMENT BE DEMANDED, ACCEPTED OR RECEIVED OR A DEPOSIT OF MONEY BE REQUIRED IN ADVANCE OF FINAL DELIVERY? YES NO

IF YES, WHAT IS THE BASIS OF CALCULATION OF SUCH PAYMENT? _____

HAVE YOU PREVIOUSLY REGISTERED WITH THE CITY OF TROY? YES NO IF YES, WHEN? _____

HAS A SOLICITOR'S LICENSE ISSUED TO THE APPLICANT UNDER THIS ORDINANCE EVER BEEN REVOKED? YES NO

HAVE YOU EVER BEEN CONVICTED OF A VIOLATION OF THIS ORDINANCE OR THE ORDINANCE OF ANY OTHER

ILLINOIS MUNICIPALITY REGULATING SOLICITING? YES NO

IF YES, WHERE?

LIST ALL MISDEMEANOR ARRESTS AND/OR FELONY ARRESTS WITH THE DATE, LOCATION OF THE OFFENSE AND THE DISPOSITION OF THE ARREST (i.e. Battery arrest, June 15, 2020, Troy, IL, Guilty conviction):

OATH OF APPLICANT

I, _____ (print name), under Oath, do state that I have read and understand chapter 111 sections 111.01 through 111.17, of the City of Troy and agree to abide by all the terms and conditions thereof, in consideration of the issuance of a Solicitor's License as provided in said Chapter. I understand that solicitation may not be conducted in the City of Troy until such a time as a license is issued. I further state that the foregoing information is true and correct and that I have not falsified any information provided in or attached to this application. I hereby consent to a driving record and criminal history background check.

(Signature)

SOLICITOR FEES

The permit is valid for Thirty (30) days at a cost of \$100.00 per person. After the 30 days, if you want to extend your solicitation time, there is no additional charge for 2 extensions of a 30 day period up to a year from the initial registration. At the one year anniversary date the \$100.00 fee must be paid to start the process again, which includes an updated background check. A driver's license or other photo ID is required, in person, at time of application. Payment must be received in this office before application can be processed.

NOTE: For a large group, please allow up to three weeks for processing. Please obtain applications from our website www.Troyil.us and fill out prior to dropping at off at police department if at all possible.

OFFICIAL USE, ONLY

CHIEF OF POLICE SIGNATURE FOR APPROVAL: _____

STARTING DATE: _____ ENDING DATE: _____