

CDC GUIDELINES MUST BE FOLLOWED AT ALL TIMES

Soliciting at the Intersection of Main and Market Streets

ALL FOUR STOPS MUST HAVE ORANGE CONES IN FRONT OF EACH PERSON SOLICITING.

IF YOU NEED ORANGE CONES, PLEASE CONTACT THE CLERK'S OFFICE PRIOR TO THE DATE OF SOLICITING.

Please read the application form carefully. The following guidelines MUST be followed & complied with prior to review and approval by the Mayor.

1. The application form must be completely filled out and a **Certificate of Insurance** must be included as part of the application. The CITY OF TROY must be designated as the CERTIFICATE HOLDER (not the agency) by the insurance company insuring the soliciting agency for the event. The Certificate shall be in the amount of \$2,000,000. The Mayor will not consider for approval any application that does not supply all required information, as well as a Certificate of Insurance. This includes all persons soliciting and the time and date of solicitation.
2. The completed form and Certificate of Insurance **must be filed in the City Clerk's office no later than three (3) days prior to the soliciting date.** This allows the Mayor time to review the application and to contact the soliciting agent / agency if clarification or additional information is needed. Please be sure to include telephone numbers where required on page 2 and 3. No application will be considered for approval that is filed less than three (3) days prior to soliciting date.
3. **All solicitors must be at least 16 years of age and wear a high visibility vest while soliciting.**
4. No soliciting agent / agency may solicit contributions by persons standing on highways unless this application has been reviewed and approved by the Mayor. It shall be the responsibility of the soliciting agent/agency to verify this application has been approved.
5. "Soliciting Agent", as defined in the ordinance, means a person who is empowered by an authorized soliciting agency, as evidenced by a writing executed by the authorized soliciting agency and filed with the City Clerk to stand on a highway within the city of Troy for the purpose of soliciting contributions from the occupants of motor vehicles.
6. As the City Clerk receives applications, the time and date of filing shall be noted on the application. **An application shall be effective for thirty (30) days.**
7. Only one authorized soliciting agency at a time shall be permitted to solicit contributions from occupants of vehicles. If more than one authorized soliciting agency desires to solicit contributions from vehicle occupants, the authorized soliciting agency which filed an application with the City Clerk first shall be given preference.
8. If all conditions set forth are met, the soliciting agent may stand at the intersection of Main and Market Streets and solicit contributions for the authorized soliciting agency from the occupants of vehicles coming to a stop at that intersection. **Per the Mayor, due to safety considerations, only four soliciting agents will be allowed to solicit at the intersection. One on the south side and one on the north side of Main Street where it intersects with Market Street and one on the east side and one on the west side of Market Street where it intersects with Main Street.**

**KEEP THIS
PAGE
FOR
REFERENCE**

Per Illinois Vehicle Code, all soliciting by persons standing on highways from occupants of vehicles must be done at intersections where all traffic is required to come to a full stop. Illinois Department of Transportation has notified us that legal counsel states that the traffic signs with periodically changing red, yellow and green lights do not require all traffic to come to a full stop. This condition of the statute is met only at intersections controlled by ALL-WAY STOP SIGNS. All soliciting by persons standing on highways from occupants of motor vehicles in the City of Troy will be conducted only at the intersection of Main and Market Streets.



**APPLICATION TO SOLICIT CONTRIBUTION BY PERSONS
ON HIGHWAYS FROM OCCUPANTS OF MOTOR VEHICLES**
Pages 2 & 3 of application to be submitted with **Certificate of Insurance** to the City Clerk

116 East Market St, Troy, Illinois 62294
Mayor / City Clerk (618) 667-6741

Please PRINT using only BLUE or BLACK ink.

Applicant: Initial in the box that the Agency and the Applying Officer have received page 1 (guidelines 1-8) of this Soliciting Application:

Best Contact Number with Name: _____

Proposed Date(s) of Solicitation: _____

9. Complete Legal Name of Authorized Soliciting Agency: _____

(An agency which is registered with the State of Illinois's Attorney General as a charitable organization as provided by "An act to regulate solicitation and collection of funds for charitable purposes providing for violations thereof, and making an appropriation therefore," and is engaged in a statewide fund-raising activity throughout the State of Illinois.)

10. Date when the authorized soliciting agency became registered with the Attorney General of the State of Illinois as a charitable organization: _____

11. Address of Soliciting Agency Headquarters:

12. Name and Address of Local Chapter / Unit which desires to solicit contribution:

13. Name and Address of ALL Soliciting Agents. (Per Ordinance no more than (4) people at a time.) If solicitors will be working more than one date and/or in staggered hours please indicate this information.

If more space is needed, an additional sheet may be attached.

(Please print) Name	Address	Date / Time
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

WITH THE FILING OF THIS APPLICATION IN THE CITY OF TROY CLERK'S OFFICE THE SOLICITING AGENCY CERTIFIES THAT IT WILL BE LIABLE FOR ANY DAMAGE OR INURIES TO ANY PERSON ON PROPERTY OCCURRING DURING THE SOLICITATION WHICH ARE CASUALLY RELATED TO AN ACT OF ORDINARY NEGLIGENCE OF THE SOLICITING AGENT.

Please **PRINT** using only **BLUE** or **BLACK** ink.

Local Not-for-Profit Soliciting Agency:
 (print) _____

President of Local Agency:
 (print) _____

Signature and Date of **President of Soliciting Agency:**

Phone Numbers: (work) _____
 (home or cell) _____

Office of Soliciting Agent:
 (print) _____

Authorized Soliciting Agent Filing Solicitation
 Application for Local Soliciting Agency
 (print) _____

Signature and Date of **Agent Filing Application:**

Phone Numbers: (work) _____
 (home or cell) _____

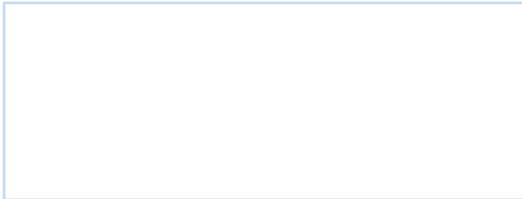
*** SIGNATURES MUST BE WITNESSED BY A NOTARY PUBLIC ***

State of Illinois - County of Madison

This instrument was acknowledged before me on (Date) _____

By (Sign) _____ As **President** of the Local Soliciting Agency.

NOTARY SEAL



Signature of Notary: _____

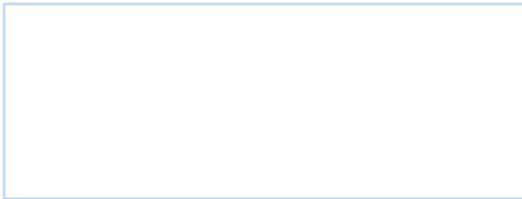
Commission Expiration Date: _____

State of Illinois - County of Madison

This instrument was acknowledged before me on (Date) _____

By (Sign) _____ As **Officer** of the Soliciting Agency and
 as Authorized Soliciting Agent Filing Solicitation Application for the Local Soliciting Agency.

NOTARY SEAL



Signature of Notary: _____

Commission Expiration Date: _____

***** OFFICE USE ONLY *****

A filed application shall be effective for (30) days.

Application has insurance document attached.

Application has been REVIEWED and APPROVED for the date(s) of _____.

 Signature of **Mayor**, City of Troy, Illinois

 Signature of **City Clerk**, City of Troy, Illinois

 Date Signed

 Date Signed, Filed, and Agency Notified of Approval