APPLICATION FOR PEDDLERS AND SOLICITORS LICENSE

VILLAGE OF SCHAUMBURG

101 Schaumburg Ct., Schaumburg, IL 60193-1899 FINANCE DEPARTMENT • 847.923.4546/4547 • FAX <u>8</u>47.923.2474/2454

Solicitor License Fee \$100.00 (no proration applies) Full Name:							
							First
Home Address:	Street Number Street Name		<u> </u>	<u> </u>	7.		
Home Phone #:	Street Number Street Name	Business	City Phone #:	State	1		
Business Name:							
Business Addres	ss:						
	Street Number Street Name	Ste #	City		State	Zip	
Name of Supervisor		Super	visor's Phone #				
Type of Busines	s:		State/Village Sales Tax #				
Merchandise:							
1.)	List below the name of the Par whom you work, and the teleph	tnership, Corporatio	n, or Proprietorshi	p for			
2.)	List below the cities in which you have previously solicited.						
3.)	Has your application, or license, for Soliciting, or Peddling, even been revoked or denied? If so, please explain:						
4.)	Have you ever been convicted Ordinances? If so		Solicitors/Peddler	S			
	5.) Have you ever been a If so, where, when, what offen						
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NOTE: All information on this application must be answered completely and legibly.

I understand the issuance of this License is conditional upon compliance with all Village Ordinances and the result of an investigation by the Director of Police, or his Agent, into my character, credit, and background in order to approve or deny this application.

Signature:

******FOR OFFICE USE ONLY******* DEPARTMENT CHECK - ANSWER AND RETURN TO THE ACCOUNTING DEPARTMENT () POLICE DEPARTMENT APPROVED/DENIED