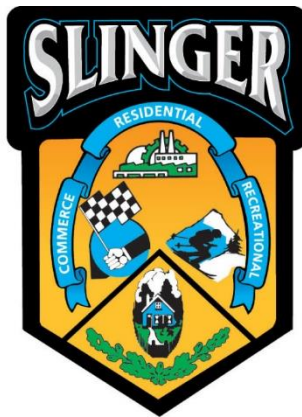


Village of Slinger

*Incorporated 1869
Washington County*

*300 Slinger Road
Slinger, Wisconsin 53086*



Slinger Utilities

*Electric, Water, Sewer,
& Stormwater*

*Telephone: (262) 644-5265
Facsimile: (262) 644-6341*

SOLICITOR PERMIT

For any peddlers, canvassers, transient merchants

Canvassers/Peddlers good for 60 days. Transient Merchants good for 1 year.

DATE: _____

Fee: \$100 Non Refundable - up to 3 people & \$5 each additional person on permit.

The undersigned hereby applies for a Solicitor Permit Commencing on _____ until _____, between the hour of _____ until _____ unless revoked for cause before expiration, and hereby agrees to comply with all Federal, State and local laws, resolutions, ordinances, and regulations.

Business Name: _____

Name: _____ Middle _____ Last _____ Maiden _____

Date of Birth _____ Phone Number _____ Email _____

Permanent Home Address: _____

H: _____ W: _____ Eyes _____ Hair _____ Gender M/F: _____ Race: _____

Driver's License Number & Make & Model of Vehicle:

Have you ever been convicted of any felony or misdemeanor for violation of any Federal, State or Local laws, or are there any criminal charges presently pending against you?

_____ No _____ Yes If yes, explain fully on the backside of this form.

Premises Where Selling Materials: _____

Source of Materials Being Sold: _____

Nature of Business/Goods Being Sold: _____

Name & Address of Business: _____

List Three (3) Municipalities you last conducted business:

_____, _____, _____
List any and all Convictions, Misdemeanors, Felony or Other Pending Charges Against you:

*As the applicant I grant the Village of Slinger authorization to obtain any information and records pertaining to me from any source and I hereby release any individual or institution from any and all liability for damages of whatever kind which may result to me, my heirs, family, or associates because of compliance with the authorization and request to release information.

Signature of Applicant: _____

Name/Address/DOB/Drivers License Number of Other Employees:

Name: _____ Middle: _____ Last: _____ Date of Birth: _____

Address: _____

EMAIL _____

Driver's License Number & Make & Model of Vehicle:

List an and all Convictions, Misdemeanors, Felony, or Other Pending Charges Against you:

Signature: _____ *see above notice

Name/Address/DOB/Driver's License Number of Other Employees:

Name: _____ Middle: _____ Last: _____ Date of Birth: _____

Address: _____

EMAIL _____

Driver's License Number & Make & Model of Vehicle:

List any and all Convictions, Misdemeanors, Felony, or Current Charges Against you:

Signature: _____ * see above notice.

Name/Address/DOB/Driver's License Number of Other Employees:

Name: _____ Middle: _____ Last: _____ Date of Birth: _____

Address: _____

EMAIL _____

Driver's License Number & Make & Model of Vehicle:

List any and all Convictions, Misdemeanors, Felony, or Current Charges Against you:

Signature: _____ * see above notice.

*If there are additional names, include them on a separate sheet of paper.

Background Check(s) on : _____

Approved: _____ Not Approved: _____ Reason: _____

Notes: _____

Permit # Issued, On & By: _____

I:forms/license & permits/Solicitors/blank application