

## SOUTH BARRINGTON APPLICATION FOR SOLICITOR PERMIT NON-COMMERCIAL



Date	e of Application:
	The applicant shall verify under oath by signature, that the statements made in the application are true, complete and accurate.
1.	Applicant's Legal Name:
2.	Applicant's Phone Number:
3.	Applicant's Date of Birth:
4.	Applicant's Height, Weight, Eye Color, Hair Color (include photo):
5.	Driver's License Number and State:
6.	Vehicle License Plate Number and State:
7.	Applicant's Current Address:
8. 9.	Organization Name: Organization Address:
10.	The charitable purpose of the organization and tax exempt status (include a copy of tax exempt form)
11.	Specific dates or date range in which the applicant will solicit:
12.	Names of three (3) most recent communities where the applicant has solicited house to house:

	Have you ever previously	11		e	
-	If	so, when?			
14.	Have you ever had a perm	it revoked from AN	NY village, including	g South Barrington?	
-	If yes, why?				
15.	Have you ever been convi-	cted of a felony, sex	x offense, or misden	meanor under the laws of the state of	
]	Illinois or any other state of	or federal law of the	e United States?	If yes, explain:	
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All state	ements made by the applic	ant upon the compl	letion or in connecti	on therewith, shall be under oath. The	
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Departn Applica Investig Chief of	nent.  Int Signature  gator Recommendation:	Approve	Deny	Date:	

The Village is authorized, pursuant to its home rule powers and the laws of the State of Illinois, to license and regulate solicitors doing business within the Village; and the President and Board of Trustees find that the public must be protected against fraud and deceitful business practices, and against unwarranted intrusions upon private premises; and the President and Board of Trustees find that public health, safety and welfare are served, and the rights of individuals are protected, through the licensing and regulation of solicitors doing business within the Village. (Ord. 0-85-235, 10-10-85)