

# WOLFE CITY SOLICITOR'S PERMIT APPLICATION

## Required Documents for Submittal

1. Completed application form
2. A \$1,000 bond signed by the applicant, and a surety company authorized to do business in the state, and conditioned for the final delivery of goods, wares, merchandise, or services, and conditioned for the correction or remedy of any and all defects in material or workmanship that may exist in the article sold by the principal of such bond, at the time of delivery, and that may be discovered by such purchaser of customer within 30 days after delivery, and which bond shall be for the use and benefit of all persons who may make any purchase or give any order to the principal on such bond, or to an agent or employee of the principal.
3. Reference showing status of the firm or company applying for permit(s):  
Provide **one** of the references below:
  - a. Financial rating publication, **OR**
  - b. DBA, or other certification demonstrating validity of business,
4. Certificate or letter for each applicant on form from the president, VP, gen. manager, or other who can **verify applicants' employment.**
5. Valid photo ID: Copy of valid driver's license or government issued ID of **each** applicant on form

### Notes

- No business or non-profit organization can obstruct traffic by selling or soliciting on a street corner or on any street.
  - No car flyers
  - Exemptions: Religious, Girl Scouts, Boy Scouts, or State licensed persons (e.g., real estate agents)
    - If you are **EXEMPT**, you will only need to provide the following:
      - Completed application
      - Copy of valid Driver's License or government issued photo ID
      - Copy of State Issued License (Real Estate, Broker, etc.)
6. **PERMIT FEES:**  
Non-refundable application fee: \$50.00.  
Upon approval a \$25.00 permit fee is required for one solicitor/itinerant vendor. If more than one person will be listed on permit: \$50.00.

# CITY OF WOLFE CITY SOLICITOR'S PERMIT APPLICATION

*Page 1 required for each solicitor/itinerant vendor along with copy of picture identification & be listed on page 3*

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

DL#: \_\_\_\_\_ State \_\_\_\_\_

SS#: \_\_\_\_\_

*Copies of original identification cards required*

Vehicle (if any): Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Color: \_\_\_\_\_ License Plate#: \_\_\_\_\_ State: \_\_\_\_\_

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Permanent address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Have you been convicted of one of the following crimes in past five years? \_\_\_\_\_

Burglary \_\_\_\_\_ Theft \_\_\_\_\_ Fraud \_\_\_\_\_ Robbery \_\_\_\_\_ Homicide \_\_\_\_\_ Murder \_\_\_\_\_ Sex Offense \_\_\_\_\_

*(Applicant must submit background check with application submittal)*

*(Check any that apply - If applying on behalf of a group, each person seeking a permit is required to provide the above information)*

If convicted, what was the punishment or penalty assessed?

If employed by another, provide the name and address of employer:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of business to be conducted, and items to be sold:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates during which business will be conducted:

\_\_\_\_\_

Explain the content of any signs or posters that will be used:

\_\_\_\_\_  
\_\_\_\_\_

**PERMIT FEES:**

Non-refundable application fee: \$50.00.

Upon approval a \$25.00 permit fee is required for one solicitor/itinerant vendor. If the application is approved, there will be an additional \$15.00 for each identification card issued. All information contained in this application is subject to verification by the Wolfe City Police Department.

I understand and agree to abide by the rules and regulations governing the activities described in this application. I further understand that any incomplete or false information provided in this application may result in denial of the permit.

X \_\_\_\_\_  
(signature of applicant) (date)

**APPROVED:**

X \_\_\_\_\_  
City of Wolfe City (date)

Fee: \$ \_\_\_\_\_ Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Receipt No.: \_\_\_\_\_

## Additional Applicants:

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

