

VILLAGE OF FORSYTH

301 S. Route 51
Forsyth, IL 62535

Phone: (217) 877-9445 / Fax: (217) 877-9863



**SOLICITATION PERMIT
APPLICATION**

APPLICANT:

Name: _____

Address (list all addresses of residence during the past two (2) years & the length of time at each address):

Phone Number: _____

Date of Birth: _____ Birthplace: _____

Social Security Number: _____

Driver's License Number: _____ State of Issuance: _____

OR

Current State or Federal Identification Card: _____

Physical Description:

BUSINESS:

Business Name: _____

Business Address: _____

Business Phone: _____

Initial Date of Employment: _____

Solicitation Subject Matter Description:

Date(s) Seeking Solicitor's Permit: _____

List date(s) when any prior permit was issued and any revocation of a previous permit:

Has a solicitation permit been previously issued by any other jurisdiction, and if so, list the jurisdiction and whether the permit was ever revoked:

List any information regarding any conviction of any felony or misdemeanor involving dishonesty, theft, fraud, false statements, a threat to public safety, or a crime involving sex offenses or offenses involving bodily harm against persons under the laws of this state or any other state or federal law of the United States within five (5) years of the date of the permit application:

\$50.00 Application Fee: Required at time of the application for the investigation and administration of the provisions. The fee will not be refunded if the application is denied.

I agree to a background check by the Village of Forsyth. I certify that the above information is true and correct to the best of my knowledge. I understand that if the information contained on this application is false, the permit is void.

Signature of Applicant

Date

STATE OF _____)

) SS

COUNTY OF _____)

The undersigned swears that all statements are true and correct.

Signed and sworn to before me on this _____ day of _____, 20_____

By _____.

Notary Public

(Seal)

For office use only	
Application # _____	
Date approved: _____	Approved by: _____
Permit # _____	
If not Approved, Reason: _____	
Date not Approved: _____	Not Approved by: _____