

VILLAGE OF ARTHUR
PEDDLER'S AND SOLICITOR'S LICENSE APPLICATION

Name of Applicant: _____

Address: (legal & local): _____

Telephone No.: _____ Age: _____ Date of Birth: ___/___/___

Ht.: _____ Wt.: _____ Eye: _____ Hair: _____

Driver's License No. or State Photo ID No.: _____ State: _____
(Photocopy attached)

Employer or Company: _____

Address: _____

Telephone No.: _____ Illinois Retailer's Occupation Tax No.: _____

Vehicle Year: _____ Make: _____ Model: _____ License No.: _____

State: _____

Names of the most previous three (3) communities where applicant has worked:

(1) _____

(2) _____

(3) _____

Items to be sold or solicited:

Period of time for which license is sought: _____

Proposed method of operation: _____

Have you ever been convicted of a felony under the laws of the State of Illinois or any other state or Federal law of the United States? yes _____ no _____

The undersigned applicant does hereby swear or affirm that the above information is true and correct.

Signature of Applicant: _____ Date: _____

Payment of \$25.00 non-refundable application fee: _____

Police Background check: _____

Application: Approved _____ Disapproved _____ Date: _____

Single Day: ___ (\$25.00) Weekly ___ (\$125.00) Annual ___ (\$250.00)

Officer: _____