## SOLICITOR LICENSE APPLICATION



## Each applicant must:

- o Submit a separate application per applicant
- o Submit a copy of a valid ID
- o Pay \$75.00 application fee via cash or check
- o Submit to a background check at the Waterman Police Department

## **APPLICANT INFORMATION**

Name of Organization:		Are you a charity?	
Organization's Address:			
City, State & Zip Code:			
Business Phone: Wel			
Applicant's Name:			
Applicant's Address:			
Date of Birth: Social Security #:			
Phone #:	Driver's License #:		
Vehicle Make, Model, C	olor, & License Plate:		·
Have you been convicte	d of any misdemeanors c	or felonies? If so, please explain:	:
PRODUCT SALES INFORMATI	<u>ON</u>		
Description of product b	peing sold:		
Date(s) when product w	rill be sold (no more than	120 days):	
Location product will be	sold:		
Product sales hours (mu	ıst be between 9am – 8pı	m):	
Illinois sales tax #:			
Signature of applicant: _		Date:	
	FOR O	FFICE USE ONLY	
	Approved	Denied	
Date Approved/Denied:	License #	Application Fee Paid:	Date:
Approved by:			
Police Chief Signature		Date	
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