APPLICATION FOR SOLICITOR AND CANVASSER LICENSE

Haddon Heights, New Jersey

Name		Telephone #	
Permanent Home Address			
Height Weight	Marital Status	US Citizen? Y	N
Color Eyes Color Hair	Place of Birth	Date of Birth Age	
Complexion Social	Security #	_ Driver's License # Sta	ite
Place of Residence for the Last	Three Proceeding Years		
Brief Description of the nature	of the business and the goods to	be sold, literature to be distributed or service to be a	rendered:
If employed, the full name of the	e Employer	······································	
Employer Address		Employer Phone Number	
Is Employer an Individual, Partr	nership or Corporation?		
Credentials establishing the exact	ct relationship of Applicant with Er	mployer (ID)	
Length of time for which the lic	ense to do business is desired		
Place where the goods or proper	ty to be sold are manufactured or p	roduced	
Where are the goods or products	located at the time this application	is filed	
The proposed method of deliver	у		
	Fingerprinting Completed?	Y N Date	
PHOTO	Has applicant ever been convicted of any crime, misdemeanor, or violation of any Municipal		
	Ordinance? Y N		
	If so, what is the nature of the	offense?	
	Punishment or Penalty assessed?		
	Date of Application		
Photograph in duplicate taken	Names and Addresses of at lea	st two reliable property owners of Camden County, or s	uch other
within 60 days immediately	available evidence as to the good character and business responsibility of the applicant		
prior to the date of filing this application. Picture must show		, , , , , , , , , , , , , , , , , , , ,	
head and shoulders.			
	* FEE \$150.00 plus the cost	of fingerprinting and investigation*	
	EDORSEMENT OF	CHIEF OF POLICE	
APPROVED	DISAF	PPOVED	
COMMENTS			

CHIEF'S SIGNATURE