

****NO APPLICATION WILL BE ACCEPTED WITHOUT A COPY OF A PHOTO ID****
**** A NON-REFUNDABLE \$50 FEE IS DUE AT THE TIME THE APPLICATION IS FILLED OUT****

APPLICATION FOR CERTIFICATE OF REGISTRATION
 SOLICITOR LICENSE



LICENSE#	
NAME:	ORGANIZATION:
TELEPHONE #:	TELEPHONE #:
ADDRESS:	ADDRESS:
CITY STATE ZIP	CITY STATE ZIP
HOW LONG HAVE YOU LIVED AT ABOVE ADDRESS?	PRODUCT/SUBJECT MATIER:
PREV. ADDRESS (IF UNDER 3 YEARS):	TIME EMPLOYED BY ORGANIZATION:
CITY STATE ZIP	PREVIOUS EMPLOYER (IF UNDER 3 YEARS):
DATE OF BIRTH: AGE:	ADDRESS:
DIVERS LICENSE #:	HAS A CERTIFICATE OF REGISTRATION ISSUED TO
SOCIAL SEC.#:	YOU BY THE VILLAGE EVER BEEN REVOKED:
HEIGHT: WEIGHT:	IN ANY OTHER MUNICIPALITY? YES NO
HAIR COLOR: EYE COLOR:	DATE OF PREVIOUS APPLICATION:
MARRIED? SINGLE?	
SPOUSE'S NAME:	

APPLICANT'S SIGNATURE _____

DATE OF APPLICATION _____

VILLAGE OF VILLA PARK CERTIFICATE OF REGISTRATION FOR SOLICITOR'S LICENSE

LICENSE#:	_____	NO SOLICITORS INVITED Village of Villa Park Ordinance 1181 Violators will be prosecuted
DATE OF APPLICATION:	_____	
EXPIRATION DATE:	_____	
NAME OF INDIVIDUAL:	_____	
COMPANY NAME:	_____	
PRODUCT/SERVICE:	_____	

*Certification of Registration must be clearly displayed on his/her person
 *No solicitation is to be made before 9AM or after 7:30PM
 *No solicitation is allowed on Sundays or holidays
 *Do Not solicit any home displaying the sign at the right of this license or any other "No Solicitors" sign

 Village Manager