



**CITY OF ROCKWOOD**

**APPLICATION FOR A LICENSE TO SOLICIT**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(First) (Middle) (Last)

Present Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Description of the nature of your business: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of your employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

In what capacity do you serve the company? \_\_\_\_\_

How long do you plan to work in the City of Rockwood? \_\_\_\_\_

**Dates:** From \_\_\_\_\_ To \_\_\_\_\_

**Hours:** From \_\_\_\_\_ To \_\_\_\_\_

Will you be working from a vehicle? \_\_\_\_\_ License Plate # \_\_\_\_\_

References: 1) Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

2) Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

3) Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

Have you ever been convicted of any crime, misdemeanor or violation of any Municipal Ordinance? \_\_\_\_\_

If yes, explain \_\_\_\_\_  
\_\_\_\_\_

*I hereby certify that the above answers are correct and true.* \_\_\_\_\_

*Signature of Applicant*

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**Investigation warrants: APPROVAL \_\_\_\_\_ REFUSAL \_\_\_\_\_ of this application.**

**Reason:** \_\_\_\_\_

**Chief of Police - Signature:** \_\_\_\_\_