



City of Prairie Village Application for Solicitation Permit

Application No. _____
 Permit No. _____
 Customer No. _____

Company Name	
Name of Person Completing Application	
Relationship to Company/Organization	
Business Mailing Address	
City/State/Zip	
Business Phone	
Home Phone	
Sales Tax I.D. State: No:	
Email Address	

List ALL Individuals who will be soliciting (proof of Identification will need to be from each person listed below:

Full Name		DOB	
Home Street Address			
City/State/Zip			
Full Name		DOB	
Home Street Address			
City/State/Zip			
Full Name		DOB	
Home Street Address			
City/State/Zip			
Full Name		DOB	
Home Street Address			
City/State/Zip			
Full Name		DOB	
Home Street Address			
City/State/Zip			

Date Solicitation will be undertaken:

Date		Date		Date		Date	
------	--	------	--	------	--	------	--

It is unlawful to solicit prior to 10 a.m. or after 8 p.m. or between 5:30-7 p.m. on any day

List ALL vehicles that will be used during the door-to-door solicitation:

Year		Make		Model	
Color		License State		Plate Number	
Year		Make		Model	
Color		License State		Plate Number	

Contact person/Supervisor available during the scheduled solicitation in the City:	
Name:	_____
Home Address:	_____
City/State/Zip:	_____
Home Phone:	_____ Business Phone: _____

I hereby certify, pursuant to P.V. M.C. 5.24.040, that each individual listed in this application, as an individual who will be soliciting, has not been convicted of a felony, misdemeanor, or ordinance violation involving force, violence, moral turpitude, deceit, fraud, or the violation of any law regulating the act of soliciting as defined in this chapter within the past five (5) years in this state or any other state or subdivision thereof of the United States. Solicitor Identification card must be displayed on solicitor's person at all times while soliciting in the City. Solicitors must have in their possession a picture identification (Driver's License) at all times while soliciting in the City. A copy of the ordinance is provided by request with this application.

Signed on behalf of Company/Organization/Individual:

_____ Signature _____ Title _____ Date

Permit fee: \$12.00 per day/per solicitor

Number of Solicitors _____ **x \$12.00 (each)** **x Number of Days** _____
=Total Due \$ _____

Payment Type	Cash <input type="checkbox"/>	Check <input type="checkbox"/>	CC <input type="checkbox"/>	(accepted: Amex, Discover, Mastercard, Visa)
Name on Card	_____		Signature	_____
Card Number	_____	Exp. Date	_____	CVV _____

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.

• • • • •
For Office Use ONLY

Date	_____	Amount Paid	_____	CK Cash Card	_____	Rec'd by	_____
<input type="checkbox"/> Information to Police Dispatch		<input type="checkbox"/> Response Received					