

7286 Dietz Elkhorn Fair Oaks Ranch, Texas 78015 (210) 698-0900 (866) 258-2505 Fax (210) 698-3565 www.fairoaksranchtx.org

SOLICITOR'S AND PEDDLER'S PERMIT APPLICATION

INSTRUCTIONS: Print all information requested. Do not leave any spaces blank. If a particular section is not applicable to you, indicate such. Applications which are incomplete or contain false information or misrepresentation will be rejected.

A Forty Dollar (\$40.00) application fee and copy of insurance card (if using a vehicle) must accompany the application.

Date of Application:					
Name of Application					
	Last	First	Mide	dle	
Permanent Address:					
	Address / Street Name				
	City	State	Zip		
	Telephone No.:				
		Cell	Home		
	*Email Address:				
	*The City will provide you with a link via email to initiate a background check.				
Sex: M F Date of Select One	of Birth: Month / Date / Year		City / Sta	nte	
Height:	Hair Color:		Eye Color:		
Driver's License No:		_ State Issued:			
In the course of your a	ctivities as a Solicitor or P	eddler, will a moto	or vehicle be used?	Yes No Select One	
If yes, please provide t	ne following information a	and a copy of insura	ance:		
Year	Make / Model	Color	License Plate No.	State Registered	
Have you been denied	a Fair Oaks Ranch Solicita	tion/Peddlers Peri	mit within the last ye	ar? Yes No Select One	
Is this permit being re	quested pursuant to emplo	oyment? Yes N Select One			

If yes, please provide the name, address and telephone number of the employer; or, if acting as an agent, the name, address and telephone number of the principal who is being represented, with credentials in written form on **company letterhead** establishing the relationship and authority of the employee or agent to act for the employer or principal, as the case may be.



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Name of Company or Organization	:					
Address:Number / Street		City	State			
Business Telephone #: ()						
Describe the service or product you	u wish to solicit o	r peddle:_				
Date(s) and Time(s) of Solicitation,	/Peddling:	(Not to ex	cceed three (3) Months)		
Principal's Sales Tax License Numb	er (as applicable):				
Last five (5) cities/towns where ap	plicant has cond	ucted solic	citations or peddlir	ng (as applicable):		
1		4				
2		5				
3						
Have you ever been convicted of a	crime? Yes Select On	No e	If yes, supply requ	uested information below:		
Date of Arrest:	What was the	charge? _				
Location:	What was the disposition of your case?					
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Please provide additional page(s) if necessary.

If approved, a \$30.00 Permit fee will be assessed before permit is issued.