



The City of Nolanville
Solicitor Permit

License #: _____
Date Paid: _____
Exp date: _____

*** All information required***

<u>Solicitor Information:</u>				
Name:				
Full Address:				
Phone:				
DL #:	State:	Class:	Exp:	
Height:	Eye Color:	Hair Color:		
<u>Company Information:</u>				
Name of Company:				
Full Address:				
Good or Service to be solicited:				
<u>Vehicle Information:</u>				
Year:	Make:	Model:	Color:	Plate #/State:

Solicitation Hours:

Monday – Friday: 8 a.m. – 5 p.m. only

Saturday: 10a.m. – 2 p.m.

No soliciting is permitted on Sundays

<i>Any questions regarding soliciting hours or fees please reference City Ordinance No. 7001-B (March 3rd, 2011)</i>

For license fees please refer to the City of Nolanville Current Fee Schedule

It shall be unlawful for any person to solicit within the City of Nolanville without first obtaining a Solicitors Permit. Valid identification required.

_____ Signature of Applicant	_____ Date
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POLICE DEPARTMENT USE ONLY

DL# _____ STATE: _____ CLEAR: ___ YES ___ NO

OFFICER SIGNATURE/ BADGE #

CITY EMPLOYEE