



Village of Johnstown Solicitation Permit Application

Chapter 711

Date of application: _____

Note: Complete one form for each solicitor:

Applicants Information:

Please print

Applicant Name: _____

Age: _____ Height: _____ Hair color: _____

Eye color: _____ Weight: _____

Permanent Address: _____

_____ Cell phone number: _____

Local Address: _____

Company and applicant background Information

Company name: _____

Address: _____

_____ Phone number: _____

Describe nature of solicitation: _____

List municipalities which applicant has conducted solicitation activities during the past six months: _____

Has applicant complied with requirements of the Ohio revised code chapter 1716 (if applicable) _____

Has applicant ever been denied a solicitation permit or had a permit revoked: (if so, explain) _____

Has applicant ever been convicted of a violation involving moral turpitude: (if so, explain) _____

Solicitation Schedule

Proposed dates, times and routes of solicitations:

Monday: _____
Tuesday: _____
Wednesday: _____
Thursday: _____
Friday: _____
Saturday: _____

Automobile Data

Make: _____
Year: _____
Color: _____
License plate number: _____ State: _____
Applicant's driver's license number: _____
Issuing State: _____ Expiration date: _____

**The undersigned declares that the above statements are true and accurate accounting to the best of their knowledge.
Providing or false information will be just cause to revoke this license and may cause misdemeanor charges against the applicant.**

Applicant signature _____

Fee Schedule: *five day permit \$25.00 or annual permit \$50.00*

For official use:

Permit fee: _____
Approved: _____
Rejected: _____
Date: _____