## VILLAGE OF NORTH BARRINGTON 111 OLD BARRINGTON ROAD NORTH BARRINGTON, IL 60060

PHONE: (847) 381-6000 FAX: (847) 381-3303

## APPLICATION FOR CERTIFICATE OF REGISTRATION SOLICITORS, PEDDLERS, TRANSIENT MERCHANTS, AND ITINERANT VENDORS

Name: Ph First M.I. Last  Address: City, State  Number of years at this address  If less than three (3) years, list previous address:  Place of Birth:  City State/Cou	•	
Street City, State  Number of years at this address  If less than three (3) years, list previous address:  Place of Birth:	•	
Number of years at this address  If less than three (3) years, list previous address:  Place of Birth:	•	
If less than three (3) years, list previous address:Place of Birth:		
Place of Birth:		
Place of Birth:State/Cov		
Latry State / Lov		
City State/Cot	intry	
Height Weight Hair Eyes Do ye	ou wear glasses?	
Complexion: Build: If married, spouse's n	name:	
Oriver's License No. and State: Social Security	Social Security Number:	
Name of Organization Represented:		
Organization Address (Local):		
Street	City, State, Zip	
Organization Address (Foreign):		
Street	City, Country, Zip	
Organization Telephone No. (Local) Foreign: _		
How many years employed: If less than three (3) years, list previous	ous employer(s)	
Name Address	City, State, Zip	
Name Address	City, State, Zip	
Crew Chief's Name: Pho	one:	
Description of subject matter for which you are soliciting:		
Do you seek to obtain gifts or contributions of money, clothing or any other vor any charitable or not-for-profit association, organization, corporation or project from businesses within this Village?	ect from persons in reside	
What is the name of such charitable or not-for-profit association, organization,	corporation, or project?	

Do you seek to obtain orders for the of any kind, character or description	1	0		
Period of time you will be soliciting:				
Date of Previous applications with ou	ur Village: <sub>-</sub>			
Has a previous certificate or registrati	ion ever be	en revoked by us?	If so, when?	
Make of Vehicle	Ye	Year License No. and State		
Have you ever been convicted of a fethe last five (5) years? Yes or	•	•	or federal law of the United States	s in
Have you ever been convicted of a vi Code or the ordinance of any other I				
I affirm that the above information is	s true and a	eccurate.		
Signature of Applicant			Date:	
	FOR	OFFICE USE ONLY		
Photograph		Fee Paid \$35.00	One Day	
Proof of Identification Furnished		\$50.00	More than one day, not more than one week	
Background Check Completed		\$75.00	More than one week, not _ more than one month	
		Date Issued:		
		Expiration Date:		
Approved By:		Da	te:	