



COMMUNITY DEVELOPMENT
847-459-2620 (fax) 847-459-2656
847-459-2621

COMMERCIAL SOLICITATION/PEDDLING PERMIT APPLICATION
Fee: \$14.00 per person per day due upon submission of application. Allow 7-10 days for approval.

(Please print or type)

DATES, HOURS, AND LOCATION FOR WHICH THE PERMIT IS REQUESTED: _____

APPLICANT NAME: _____

HOME ADDRESS: _____

CITY _____ ST _____ ZIP _____

HOME PHONE: (_____) _____ - _____

DRIVERS LICENSE NUMBER: _____ STATE ISSUED: _____

NAME OF THE BUSINESS FOR WHOM THE SOLICITATION OR PEDDLING WILL BE CONDUCTED:

BUSINESS OR ORGANIZATION ADDRESS: _____

CITY _____ ST _____ ZIP _____

BUSINESS PHONE: (_____) _____ - _____

FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN): _____

Describe the purpose of the solicitation or peddling activities: (include the merchandise or commodities the applicant proposes to sell or deal in and the current registration under the Retailer's Occupation Tax Act, if any) _____

Have you applied for a Peddlers or Solicitors Permit or registered to conduct either of those activities

Within the Village of Wheeling? _____ If yes, indicate when _____

(Complete back page)



Have you ever been convicted of a felony or crime of moral turpitude? _____ If your response is yes, state the crime(s) for which you were convicted, the date(s) of conviction and the location of such conviction(s) _____

Have you or the business or organization for which you will be peddling or soliciting ever had a peddling or soliciting permit or license suspended or revoked by any state or local government? _____ If your response is yes, state the date(s) and location(s) of such suspension(s) or revocation(s) _____

I _____ (applicant's printed name) being sworn upon oath depose and state that I have read the foregoing application, understand its contents and that all of the information provided in this application is true and correct. I have reviewed and understand the appropriate village ordinances relating to the solicitation to be conducted by me. I further authorize the Village of Wheeling or its agents to obtain, prepare, use or furnish information concerning all matters set forth in this application, including but not limited to my current and former employment, criminal background, general reputation and other relevant information and I hereby release the Village of Wheeling, its officers, agents and employees from any liability of whatever kind and nature arising out of their receipt or use of such information.

_____ Date _____ Applicant signature _____

Subscribed and sworn to before me this _____ day of _____, 20 _____.

Notary Public

FOR OFFICE USE

Police Department

Director of Community Development

APP ___ REJ ___ DATE _____

APP ___ REJ ___ DATE _____

Permit Number _____ Issued by _____ Number of Days _____ Fee _____