



ZION POLICE DEPARTMENT

2101 Salem Blvd., Zion, IL 60099

847-872-8000 - Fax 847-746-4093

www.cityofzion.com



SOLICITOR APPLICATION – FOR PROFIT

FEES:	Applicant shall file with the Police Department a solicitor's permit bond running to the City in the amount of \$1,000 executed by the applicant, as principal, OR a Certificate of Insurance. Applicant shall also submit 2 (2 x 2) photographs. All permit fees are NON-REFUNDABLE
_____ Per Day - \$30.00 per Solicitor	
_____ Per Year - \$140.00 for up to 5 Solicitors	
_____ plus \$30.00 for each additional solicitor over 5	
_____ Per applicant fingerprinting charge - \$10 (Res)	
_____ \$25 (Non)	
_____ TOTAL DUE	

Applicant's Full Name:				
Address:				
Phone No.:		Driver's License No & State of Issue:		
Date of Birth:	Height/ Weight:	Sex:	Eye Color:	Hair Color:
Nature of Business:				
Name and Address of Employer:				
Employer Phone No.:		Illinois Sales Tax No.:		

Description of Vehicle(s) being used: (Use back of this form if necessary)

<u>Make/Model</u>	<u>Color</u>	<u>Year</u>	<u>License No.</u>	<u>State</u>

Have you been convicted of a violation to the solicitor ordinance of this or any other municipality? _____

Have you been convicted of a felony under the law of this or any state or the federal government? _____
(If yes, explain on the back of this form.)

Have you ever been arrested? _____ If yes, when, where, and for what _____

It is hereby declared to be unlawful to rap or knock upon any door or create any sound in any other manner calculated to attract the attention of the occupant of such residence for the purpose of soliciting prior to **10:00 a.m.** or after **7:00 p.m.** on any weekday, prior to **10:00 a.m.** or after **5:00 p.m.** on any Saturday or at any time on Sunday or on a state or national holiday.

The information supplied herein is true to the best of knowledge and I agree to carry this permit upon my person while engaging in the aforementioned activity and agree to immediately, upon contacting a prospective customer in the City of Zion, exhibit this permit and identify myself.

Signature of Applicant _____ Date _____
(Any false statement shall be sufficient reason for rejection of this application.)

(For Office Use Only)

_____ Approved _____ Not Approved _____
Chief of Police

Permit Expires: _____ Receipt No.: _____ Date _____