

# City of Euclid Police Department

545 East 222nd Street Euclid, Ohio 44123 (216) 731-1234

## **Application for Solicitor's Permit**

All questions must be answered by applicant. Incomplete applications will not be processed.

The fee for each license shall be \$200 for one year or \$100 for six months.

All employees/representatives of any licensed solicitor are required to pay a fee of \$50 for one year or \$25 for six months.

All applications require a non-refundable fee of \$30. This fee is to be paid when the applicant obtains the Ohio Webcheck fingerprint background check.

Ohio Webcheck is performed at the police department. Please call 216-289-8514 for Webcheck times. No permit will be processed until Webcheck results are obtained.

All solicitors must adhere to City of Euclid Ordinances, Chapter 757, governing peddlers and solicitors.

Ice cream vendors must have vehicles inspected per Ordinance 757.21.

Fee Example:

#### **One Solicitor Six-Month Permit**

TOTAL:	\$155
Six-Month Fee (employee/representative)	\$ 25
Six-Month Permit (Company)	\$100
Fingerprint/Application Fee	\$ 30

#### Second Applicant from Same Organization

Six-Month Fee (employee/representative)	\$ 25
TOTAL:	\$ 55

Approved:_		Date:	
	Chief of Police		

#### City of Euclid-Police Department

Registration and Application for SOLICITOR'S –PEDDLERS LICENSE (Please Complete Entire Application

I, the undersigned, hereby apply to the Police Chief for a license to peddle or solicit in accordance with the City of Euclid Ordinance in effect, and for that purpose do hereby answer the questions contained in the application, and file the necessary data.

Mama				
Name:	7.0			
First	Mi	ddle	Last	
Date of Bir	rth:	Social Security Number:		
Address:				
City:		State:	Phone:	
Former Ad	dress:			
How long l	have you been a resident of	Cuyahoga County prior to m	naking this application?	
Have you e	ever been arrested?	If so, give particular	rs:	
Name and	address of person or compa	any that you represent:		
NI-4 C1-	ousiness or kind of goods to	be peddled:		
Nature of c				
	ames and addresses of your	employer(s) and your occur	vation(s) for the pact five years	
	nmes and addresses of your	employer(s), and your occup	pation(s) for the past five years:	

### CITY OF EUCLID-POLICE DEPARTMENT Registration and Application for Solicitor's – Peddler's License Page 2

Personal I	Description:			
Sex:	Height:	Weight:	Eye Color:	Hair Color:
Vehicle In	formation:			
Make:	Model:	Year:C	Color:	
License Pl	ate:Stat	e:		
Driver's L	icense Number:		Sta	nte:
Name all	other municipalities	in which you have co	nducted soliciting activ	ities in the past three months:
Have you  State prop	ever been convicted	of a violation involving		
I will conf	orm to the current C	ity of Euclid Ordinan	ces.	
Applicant	Signature:			Date:

(Incomplete or illegible applications will be refused)