

VILLAGE OF STREAMWOOD, ILLINOIS

APPLICATION FOR SOLICITOR'S BADGE OF REGISTRATION

DATE: _____

Application is hereby made to the Village Clerk of the Village of Streamwood for issuance of a Solicitor's Badge of Registration pursuant to the ordinances of the Village. In support of said application the following is submitted:

1. APPLICANT INFORMATION

Name: _____ Phone: _____

Home Address: _____ City _____ State/Zip _____

Social Security Number: _____

Applicant's Date of Birth: _____

Driver's License Number: _____

2. BUSINESS INFORMATION

Business Name: _____ Phone: _____

Business Address: _____ City _____ State/Zip _____

Contact Person with Business: _____ Phone: _____

3. Describe the item(s) being sold: _____

4. List all communities that have issued you a solicitor's badge or permit within the last twelve (12) months: _____

5. Have you ever had a solicitor's badge or permit revoked? YES _____ NO _____

If yes, give name of community, date of revocation, and explain: _____

6. Have you ever been convicted of a violation of any of the provisions of the ordinances of the Village of Streamwood other ordinances of any other Illinois municipality regulating soliciting? **YES**_____ **NO**_____

If yes, give date of conviction, name of municipality, and explain: _____

7. Have you ever been convicted of a felony under the laws of the State of Illinois or any other state or federal law of the United States? **YES**_____ **NO**_____

If yes, give date of conviction, charge, state, and explain: _____

ACKNOWLEDGEMENT

Applicant understands and agrees that additional information and material may be required during the processing of this application related to applicant’s qualifications and the information provided herein. Applicant agrees to provide such additional information and material and that failure to do so may delay the processing of this application or result in its denial.

In the event Applicant is made aware that any information or document submitted as part of this application process is inaccurate or incomplete, Applicant agrees to immediately notify the Village and provide appropriate corrections. Applicant understand and agrees to provide such additional information and material, and that failure to do so may delay the processing of this application or result in its denial.

THE UNDERSIGNED, BEING DULY SWORN, DOES STATE AS FOLLOWS:

THAT THE UNDERSIGNED HAS REVIEWED THIS APPLICATION AND ALL ATTACHMENTS SUBMITTED AND CERTIFIES THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE

APPLICANT: _____

NAME: _____

Subscribed and sworn to before me this

_____ day of _____, 20__.

Notary Public

For Office Use Only

Completed application received by: _____ Date _____

Background check completed by: _____ Date _____

Cashier Receipt No. _____ Date _____ Fee _____

Badge of Registration issued by: _____ Date _____

Badge # issued: _____