CITY OF JANESVILLE Solicitor's License Application (LN)										
Solicitor's License Application (LN) Licensing Period: July 1 through June 30										
New		Fee: \$130.00 per year				Required: Two (2) ID size photos				
Renewa		City Ordinance Chapter: 12-421				of applicants head & shoulders.				
City of Janesville ordinance 12-1 requires accounts with the City be current before a license can be issued. Fee is non-refundable.										
Company Name:					Phone #: () -				
Company Address:										
T	St	treet		City	State	Zip				
Temporary Address: (while in city)	Si	treet		City	State	Zip				
Applicant's Legal Nam	e:				Phone #: () -				
		rst	Middle	Last		,				
Home Address:		treet		City	State	7:2				
	3	lleel		City	State	Zip				
Temporary Address: (while in city)	St	treet		City	State	Zip				
List all addresses resid	led at within the	e last five (5) ve	ears.							
	SI	treet		City	State	Zip				
	Street		City		State	Zip				
	Street			City	State	Zip				
Where can you be read	ched at least fo	ourteen (14) dav	vs after leaving	Janesville?						
Address:		() - ;	,		Phone #: () -				
	Street	City	State	Zi						
Applicant Information	n For Identifica	ation Purpose	Only:							
Place of Birth:		Height:	Weight:		Hair Color:					
Date of Birth: /	/	Age:	Sex:		Eye Color:					
		Race:			Glasses:					
Identifying Marks (birth	marks, scars,	tattoos, mousta	iche, etc):							
1. Describe the nature	of your busine	ss and goods/s	ervices offered	:						
2. Where are the good	2. Where are the goods or property to be sold produced?									
3. Where are the good										
4. What is your proposed method of contact?										
5. What is your proposed method of delivery of goods?										
L										

6 List the la	st three (3) cities	towns or village	es where you have cor	ducted similar a	ctivities within the	nast				
 List the last three (3) cities, towns, or villages where you have conducted similar activities within the past three (3) years. List the most recent first: <u>1.</u> 										
			2.							
			3.							
7. Describe the vehicle(s) being used by you and your organization in conducting business:										
The vertice (b) being used by you and your organization in conducting business.										
Make	Model	Year	License & State		Owner					
Make	Model	Year	License & State		Owner					
 8. Have you or your company violated any provision of any similar or related state, federal, or local ordinance or law anywhere in the previous five(5) years? Yes No 										
If yes, complete the section below (attach additional sheets if necessary):										
Nature	of Offense:		Na	ture of Offense:						
				Charges:						
Penalt	y Assessed:									
City & State of Offense:										
Place of Conviction:										
	ing Agency:			resting Agency:						
Clerk will give you a copy of this ordinance if you desire a copy. This application must be fully completed, and submitted to the City Clerk at 18 N. Jackson St. with the above required fee and photographs. Omissions or false statements constitute grounds for denial or revocation of license applied for or issued. ATTESTATION AND APPOINTMENT OF AGENT FOR SERVICE OF PROCESS I,, being duly sworn on oath, affirm that I read this application, answered the questions myself, that my answers are true and complete to the best of my knowledge and that I agree to obey all the laws which regulate the activities I plan to engage in. I further acknowledge that I am familiar with or have asked for copies of such laws. I further hereby appoint the City Clerk for the City of Janesville as my agent for the service of process in any and of whatever nature against me arising from my activities relating to this license, in the event that after reasonable effort I cannot be served personally.										
		•	to and appointed this .	day c	of	,				
STATE OF W	ISCONSIN Rock C	County)								
Subscribed ar	nd sworn to before lay of	me this) ss.	-	Sigi	nature of Applicar	ht				
-	State									
Recommende	d for License:	Yes No	OFFICE USE ONLY							
	ended for License -			Chief of Police		Date				
License Number:										