

CITY OF ST. JOHN
APPLICATION FOR SOLICITOR'S LICENSE
As required by Ord. No. 849 9-25-91

Identification shown (driver's license) _____ Yes (Copy) _____ Yes

Date of birth _____ Home address _____

Business address _____

Tag No. _____ Color of vehicle _____ Kansas sales/tax No. _____

Have you been convicted, in the last two years, of any crime, misdemeanor or violation of any municipal law regulating peddlers or solicitors. _____

Nature of product or service in which he/she is interested _____

Name of manufacturer of such products _____

Or

Organization representing _____

Method of operation in City _____

Date _____ Signature _____

_____ Has paid the investigation fee of 25.00.

_____ May be granted a solicitor's license five days from the date of this application for the sum of 10.00, providing the the investigation of the above _____ is satisfactory.

Application No. _____

License No. _____

Date issued _____

This license expires one year from the date of issue.

Agent _____