APPLICATION FOR SOLICITOR AND CANVASSER LICENSE AUGUSTA CHARTER TOWNSHIP

License #: SOL-___-

Effective Dates:

	Full Name (First, Middle, Last):						
Business Name (if applicable)							
Name of Minor Working for Company (please attach copy of work permit							
applicable)							
Date of Birth:	Height	Weight					
Address:							
Business Address:							
Current Valid Drive	er's License # or St	tate I.D. # (<i>Include copy of</i>	licens				
Phone Number:		2 nd Phone:					
•	food related, pleas	nvolved and Method of Solici se provide copy of valid appro					
to door, by car) *If	food related, pleas	se provide copy of valid appro					
to door, by car) *If to do door, by car) *If to doo	food related, please ealth del, year, license pen convicted of a f	elony, misdemeanor or viola	oval fro				

13.	Background Check – ICHAT Completed: Yes No					
14.	For Sale of Christmas Trees Only Please Attach:					
	 Letter from the Building Department indicating that the location has the proper zoning. 					
	b. Letter of permission from property owner					
15.	Length of time the right to do business is sought?					
Date:	Signed: (Signature of Applicant's Full Name)					
	E OF MICHIGAN ITY OF					
	On this, day of, before me personally came the above-named applicant and made oath that he/she has read the foregoing application and knows the contents thereof, and that the same is true of his/her own knowledge.					
	Notary Public,County, MI. My commission expires:					
	APPLICATION FEE					
	PAID \$					
	DATE					
	CHECK #CASH RECIEPT NUMBER:					
	LICENSE FEE					
	PAID \$					
	DATE					
	CHECK #CASH(Initial application \$50.00 – License = \$50.00) RECIEPT NUMBER:					
	ApprovedNot Approved					
	Supervisor Date					