



TOWN OF EAGLE
APPLICATION FOR SOLICITOR'S PERMIT

1. Name of applicant: _____ Date of Birth: _____
2. Address of applicant (current and all addresses for past 12 months):

3. Phone number: _____
4. Social Security # _____
5. Name, address & phone number of applicant's employer:

6. Duration of employment with current employer: _____
7. Name and address of all employers during the past 12 months and nature of employment for each job:

8. Description of goods/services to be sold:

9. Description of applicant (Height, weight, date of birth, hair color, eye color):

10. Attach copy of driver's license.
11. All applicants must pay a \$25.00 fee. A record check for past criminal convictions will be performed prior to issuance of permit.

The contents of this application are true and correct under penalties of perjury.

Dated this _____ day of _____, 20_____.

Signature of Applicant: _____

If questions, please refer to the attached ordinance or contact the Town Clerk at (262) 594-5800