

City of Waverly A Great Place to Grow Solicitors and Peddlers Permit Application

The following application form must be completed by each Solicitor and Peddler intending to do business in the City of Waverly prior to acceptance by the City and issuance of a Permit.

 Name Driver's License #: 		2. Date of Birth 3.		Social Security Number	
		State:			
5. Applicant's Address					
6. Phone Number:	(Home)		(Cell)		(Work)
7. Business Status () Self Employed () Employee	8. Name of Er	mployer	9. Age	Height	Weight
10. Color of hair	Eyes	Eth	nicity		
11. Employer's Address					
12. Describe nature of solicitor or pe	eddler business you in	tend to do.			
13. Is your Employer a Corporation?	() Yes	() No			
14. How long do you intend to do bu					
15. Have you been arrested for a feld			/		
 16. Have you been arrested for a mis 17. Have you been arrested for any clindecency? () Yes 18. Have you been arrested for any volume 18. If yes, for questions 15-18, list the na 	rime involving offense () No violent crime?	es against po	ublic health and		blic
19. Description of vehicle to be used Year: Make:		lice	ense #·	State:	
I hereby state that the above and for				State	
Date: Applica	nt's Signature:				