

Town of Wareham

54 Marion Road Wareham, MA 02571

APPLICATION FOR DOOR TO-DOOR SOLICITATION

A Soliciting Permit fee of \$100.00 check (made out to *Town of Wareham*) is due at the time of application Fee paid: _____ Check #: ____ Permit #:_ The following person(s) has registered with the Town of Wareham to go house-to-house in Wareham to solicit contributions for or as a commercial salesman during the following daylight hours: **Weekdays: 10:00 am to 8:00pm** Saturdays: 9:00 am to 6:00 pm **Sundays: NO SOLICITING** In accordance with the Town of Wareham bylaws and MGL c.101, §34. **PLEASE PRINT: BUSINESS INFORMATION** Name of Company or Organization represented: Company or Organization Address: Town/City: ______ State: ____ State: ____ Zip: _____ Please give a brief description of the nature of business or goods to be sold: Dates Permit is needed: Start date: _____ End date: _____ APPLICANT INFORMATION Name of Applicant: Applicant Permanent Address: Town/City: ______ State: ____ Zip: _____ Applicant Local Address (if different):

Town: ______ State: ____ Zip: _____

Phone:		_ Email Address:		
Social Security #:		Date of Birth:		
Height:	Weight:	Eye Color:	Hair Color:	
VEHICLE INFO	<u>RMATION</u>			
Year:	Make:	Model:	Color:	
State where vehicl	e is registered:	Registration No).:	
Vehicle Owner's N	Name:			
Vehicle Owner's A	Address:			
Signed under the p	_			
Applicant's signat	ure		Date	
	OU WILL RE	ECEIVE NOTIFICA	TION UPON APPROVAL.	
		APPLICATIONS V	VILL NOT BE ACCEPTED.	
Image of License of	or ID:			
Approved by:				
Walter Correia, Chie	ef of Police	-	Date of Approval	