



Solicitors Permit Information



Solicitors Permit Application

Fee Amount: \$75.00

Type of Solicitation: _____

Company Name: _____

Street Address/City & State: _____

Responsible Party: _____ Address: _____

Phone: _____ Cell: _____

E-Mail: _____

Driver's License Number: _____ State: _____

Applicant (1) _____

Address: _____

Phone: _____ Cell: _____

Driver's License Number: _____ State: _____

Applicant (2) _____

Address: _____

Phone: _____ Cell: _____

Driver's License Number: _____ State: _____

Applicant (3) _____

Address: _____

Phone: _____ Cell: _____

Driver's License Number: _____ State: _____

Date of Event: _____ Start Time: _____ End Time: _____

Route: Beginning Point _____ Ending Point _____

Number of Individual Solicitors: _____ Number of Vehicles: _____

Describe Vehicles and License Plate

Numbers/State: _____

Details of Products/Merchandise being offered:

Names of other communities in which you have solicited funds or distributed handbills in the past six (6) months: _____

I request a permit to go from residence - to - residence in the City of Blue Ridge, to solicit, sell, distribute commercial handbills, or cause the solicitation, selling distribution of commercial handbills for any goods, services, donations, property, real or personal, tangible or intangible, and whether of value or not.

EACH Solicitor will be required to present their Driver's License to be copied prior to permit approval.

I understand that if the permit is granted, it will not be used or represented to be an endorsement or approval by the City or any of its officers or employees. **Please initial here:** _____

I understand that I can only solicit or distribute handbills in the City of Blue Ridge Monday-Friday between the hours of 9:00 a.m. - 7:00 p.m. and on Saturday and Sunday between the hours of 10:00 a.m. and 5:00 p.m. **Please initial here:** _____

I understand that I am not to solicit or distribute handbills of any type if there is a "NO SOLICITING" notice exhibited upon or near the main entrance to the premises. **Please initial here:** _____

I hereby state that the above information is true and correct. I understand that failure to comply with the provisions of this Ordinance will constitute a suspension or revocation of the permit.

Applicant Signature

Date

City Use Only

Approved ___ Denied ___ City Representative: _____

Mayor Notified: ___ Yes ___ No Remarks: _____