



755 Fellow Rd • Genoa City, WI 53128
262-279-6472 • 262-279-6618 Fax

SOLICITOR'S PERMIT APPLICATION/REGISTRATION

A permit is required to solicit goods, wares, merchandise or services within the Village of Genoa City, WI and must be presented to the person being solicited or any police officer. Permit must be carried by the solicitor at all times.

Application Fee \$50.00 <i>(Registration shall be valid for a period of 1 year from the date of entry)</i>		Date of Application:	
Last Name:		First Name:	
Residence: Street Address		City:	State:
Phone:	Birth Date:	Birth Place: (City, State)	
Driver's License # (photo copy required)		Social Security #	
Place of Employment: (company name & address)		Contact Person & Phone # of Employment:	
Other Names, Aliases or Birthdates Ever Used:			
Previous Address in Past 5 Years:		From:	To:
Description of Applicant:	Height:	Weight:	Eye Color:
Nature of Business & Type of Product/Service Offered:			
Method of Delivery of Goods: (if applicable)			
Vehicle to be Used by the Applicant in the Conduct of Business:			
Make:	Model:	License Plate Number:	
Last Cities, Villages and Towns, (not to exceed 3), Where Applicant Conducted Similar Business:			
1)	2)	3)	
Have you ever been convicted of any crime or ordinance violation related to your solicitation within the last 5 years?			
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state the nature of the offense and the place of conviction: _____ _____			

I have read all the information and fully understand its meaning.

Signature of Applicant: _____ Date: _____

<p style="text-align: center;"><i>Office Use Only: Police Dept</i></p> <p>Recommended for Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Police Chief Initials _____ Date: _____</p>	<p style="text-align: center;"><i>Office Use Only: Clerk's Office</i></p> <p>Payment Received: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ Initials: _____</p> <p>Approved by: _____</p> <p>Clerk/Treasurer: _____ Date: _____</p>
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Applicants shall present the following (if applicable):

1. A state certificate of examination and approval from the Sealer of Weights and Measures where the applicant's business requires use of weighing and measuring devices approved by state authorities.
2. A State Health Officer's certificate where the applicant's business involves the handling of food or clothing and is required to be certified under state law, such certificate to state that the applicant is apparently free from any contagious or infectious disease, dated not more than 90 days prior to the date the application for registration is made.