

TOWN OF CHESHIRE MASSACHUSETTS POLICE DEPARTMENT



APPLICATION FOR PERMIT TO SOLICIT DOOR TO DOOR

Michael J. Alibozek Chief of Police Phone: (413) 743-1501 Fax: (413) 743-1944

Permit	s are \$25.00 per	r applicant. This fe	e will need to be p	paid before application is p	rocessed		
Name of Applicant:	Last		First		Middle		
Address of Applicant:	 Number	Street		City/Town	State		Zip
Applicant Phone Number:				Applicant DOB:			_
Applicant's Height:		Applica	ant's Weight:				
Applicant's Eye Color:		Applica	ant's Hair Color:				
Applicant's Social Security	or Drivers Lic	ense number and st	ate:				
Requested dates to do busi	ness: From:		To:				
Brief description of the nat	ure of business	or goods to be sold	:				
Name and home office add	ress of the App	licant's Employer:	Name				
			Name				
Number Street			City/Town		State		Zip
Vehicle Information:							
Vehicle Make:		Vehicle Model:		Vehicle Year:			
Vehicle Reg#:		Reg. State:					
Vehicle's Owner and Addi							
	Last			First		Middle	
	Number	Street		City/Town	State	Zip	

APPLICANT IS CURRENTLY CONSIDERED A FU	JGITIVE OR A MISSING PERSON. FELONY CONVICTIONS, FUGITIVE	STATUS AND PRIOR
VIOLENT CRIMES MAY BE DISQUALIFYING. Y	YOUR SIGNATURE BELOW SERVES AS CONSENT TO CONDUCT THIS	CRIMINAL CHECK.
Signed under the pains and penalties of perjury:		
	Applicant's Signature	Date
A d ' II d Cl' C CD I' I' D '		
Authorized by the Chief of Police or his Designee:		
	Signature of Chief of Police/Designee	Date

THE APPLICANT MUST ALSO PRESENT AT THE TIME OF THIS APPLICATION A VALID DRIVER'S LICENSE WITH A PHOTOGRAPH OR OTHER FORM OF IDENTIFICATION WITH A PHOTOGRAPH IN ORDER TO PROCESS THIS APPLICATION. PRIOR TO APPROVING THIS APPLICATION, THE CHESHIRE POLICE DEPARTMENT WILL CONDUCT A COMPREHENSIVE BACKGROUND CHECK TO INCLUDE CRIMINAL ARRESTS, CONVICTIONS, WARRANTS AND FUGITIVE CHARGES. ADDITIONALLY, THIS CHECK WILL REVEAL IF THE