

STREETSBORO POLICE DEPARTMENT

ITINERANT SALES AND SOLICITING PERMIT APPLICATION

1. APPLICANT:

Full legal name: _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone number: _____ Cell Phone: _____

E-Mail address: _____

Birth Date: _____ Hgt: _____ Wgt: _____

Eye Color: _____ Hair Color: _____

Social Security Number: _____ Driver/ID # _____ State: _____

Have you ever been convicted of **any** felony crime: _____

If so, what crime: _____ Court name: _____

Have you ever been convicted of **any** misdemeanor theft offenses: _____

If so, what crime: _____ Court name: _____

Have you ever been convicted of **any** crimes involving misconduct with minors: _____

If so, what crime: _____ Court name: _____

2. VEHICLE(S) TO BE USED WHILE VENDING/SOLICITING:

Make: _____ Model: _____ Year: _____

License Plate: _____ State issued: _____

Trailer description: _____

License Plate: _____ State issued: _____

Size/length of trailer: _____ enclosed: _____

Make: _____ Model: _____ Year: _____

License Plate: _____ State issued: _____

Trailer description: _____

License Plate: _____ State issued: _____

Size/length of trailer: _____ enclosed: _____

Provide a copy of your registration and insurance.

3. BUSINESS:

Name: _____ Phone number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Type of Business: _____

Description of goods or products to be sold: _____

Are you selling food products: _____

If so, description: _____

Provide copies of health department paperwork.

Where do you plan on soliciting: _____

Door to door sales: _____

Dates of soliciting: starting: _____ ending: _____

What time of day do you plan on soliciting: _____

4. PERSONAL SOLICITING AND CHARITABLE SOLICITING:

Are you asking for money/donations for yourself: _____

Are you asking for money/donations for a Charity: _____

If so, name of Charity: _____

Address: _____

Is this Charity registered with the State and Federal Offices: _____

Provide appropriate paperwork.

All permit applicants seeking **Door-to-Door sales** that are over the age of 18, must have a background check completed with the State of Ohio Bureau of Criminal Investigation within 60 days of filing. This is also known as a Web Check and can be completed at the Portage County Sheriff's Office located at 8240 Infirmiry Rd, Ravenna OH 44266.

You may call them at 330-296-5100.

Once your application is completed, you can turn it in at any time to the Streetsboro Police Department. Only completed applications, with all paperwork and fees paid will be accepted.

Checklist of requirements:

- Completed Application
- Copy of auto Insurance
- Copy of valid vehicle registration
- Food service license (if applicable)
- Health Department certificate (if applicable)
- \$50, cash or check only (for Itinerant Vending/Sales

****Any door-to-door sales or soliciting must have an Ohio Webcheck within 60 days****

5. CERTIFICATION:

I certify that the above information, to the best of my knowledge, is true.

Applicant's Signature

Date

6. POLICE USE ONLY

Officer taking information _____ Unit number _____

Photo/BMV information _____ SPD check _____ BBB check _____

Attorney General's Complaint check _____

Ohio Webcheck _____ Food Vendor License _____

Fee pd _____ Receipt Number _____

PERMIT ISSUED: YES _____ IF NO, REASON(S) _____

Effective Date _____

Issued by _____ Date _____

Copy of Permit attached