



APPLICATION FOR SOLICITOR'S PERMIT

*Submit 2 Passport
Size Photos (2" X 2")*

Date: _____

Name: _____

Address: _____
Street City State Zip

Email Address: _____

Phone: _____ # of years at present address: _____ If less than three years, previous address:

Address: _____
Street City State Zip

Have you ever been arrested? Y / N If yes, state briefly where and when in each case: _____

Employer: _____ Phone: _____

Address: _____
Street City State Zip

Kind of Merchandise handled: _____

Will you use a vehicle? _____ Name of Owner: _____

Registration #: _____ Make/Model: _____ Year: _____ Color: _____

NJ Driver's Lic #: _____ Expiration: _____

Date of Birth: _____ Age: _____ Place of Birth: _____ Citizen: Y / N

Marital Status: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

ALL APPLICATIONS MUST BE ACCOMPANIED BY A LETTER FROM THE EMPLOYER AUTHORIZING THE APPLICANT TO ACT AS A REPRESENTATIVE.

I certify the above answers made herein are true: _____
Signature - Applicant Date

FEES: With application \$10 Borough of Rutherford Cash Check # _____
\$50 Rutherford Police Department

POLICE DEPARTMENT ACTION: APPROVED DENIED Meeting Date Approval

Police Chief Signature _____ Date