VILLAGE OF OXFORD

Police Department 22 West Burdick, P.O. Box 94 Oxford, MI 48371-0094 248-628-2838



Application for Canvassers/Solicitors Permit

| APPLICANT INFORMATION | | |
|---|--|---|
| Name: | | |
| Address: | | |
| City: | State: | Zip: |
| Phone: | Cell: | |
| Email: | | |
| Drivers License Number: | | |
| EMPLOYER/ORGANIZATION INFO | RMATION | |
| Employer/Organization Name: | | |
| Employer/Organization Address: | | |
| City: | State: | Zip: |
| Employer/Organization Phone: | | |
| | | |
| DESCRIPTION | | |
| Nature of Product/Service: | | |
| Are you part of the group that will be canvas | sing? | |
| How long do you expect to be in the Village | | |
| | Oxioiu. | |
| Duration of Permit: | | |
| RULES & FEES | | |
| | | |
| • Please canvass between the hours of 9:00 | | |
| You must carry this permit on you at all to | | |
| You must present this permit to any pers | on asking for identification in ac | cordance with all Village ordinances. |
| • Fees (per canvasser): <u>\$10.00 per day - \$50</u> | <u>).00 per month - \$100.00 per ann</u> | ual season (ice cream trucks/vans). |
| • Photo Identification must be provided for all | solicitors, and each individual must | be present at the submission of this applie |
| APPLICANT'S ENDORSEMENT | | |
| | d clearance for my use I have an | this data outhorized the Oxford |
| For the purpose of providing a personal record Police Department to search their files and connetwork (L.E.I.N) | • | |
| | | Date |

VILLAGE OF OXFORD
Police Department
22 West Burdick, P.O. Box 94
Oxford, MI 48371-0094

248-628-2838

THE VILLAGE OF OYORA MICHIGAN

Canvassers/Solicitors Permit

| State: | Zip: |
|--------|--------|
| State: | Zip: |
| | Zip: |
| | Zip: |
| | Zip: |
| ell: | |
| | |
| | |
| A 11 | |
| Addres | 38 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | Addres |