City of New Strawn

PO Box 922, 215 N. Main St. New Strawn, KS 66839 Phone: 620-364-8283 Fax: 620-364-5110

Webpage: www.newstrawn.org Email: cityclerk@newstrawn.org

Solicitor, Canvasser, Peddler License Application

License Fee: \$5 / day	Application No.
Name:	Date:
PERMANENT	LOCAL
Address:	Address:
City, State, Zip:	City, State, Zip:
Telephone:	
Employer:	Address:
Length of Service:	
Kansas Sales Tax No:	Telephone:
Driver's License #:	Social Security #:
Expiration Date:	
Male/Female:	Weight:
Eye Color:Hair Color:	
Description of the nature of your business and the	ne goods to be sold or distributed:
Proposed method of delivery:	
	trawn:
F VEHICLE TO BE USED IN SOLICITING/CANVASS	
/ehicle Make/Model:	
/ear:	Color:
Have you ever been convicted of any crime, misd nunicipal law regulating peddlers, solicitors or ca F YES, attach details hereto:	emeanor (other than minor traffic violations) or violation of any invassers? YES NO
indorsement of the City of New Strawn or any de	ed, it will not be used or represented in any way as an epartment or officer of the City.
understand that if this permit is granted, I must , Article 2, and that if I fail to follow the regulation	adhere to all regulations of New Strawn Municipal Code, Chapter ons that I may be subject to fines and imprisonment.
lease provide photograph of applicant taken wit icture shall be at least two inches by two inches	hin ninety (90) days prior to the date of making application which showing the head and shoulders of the applicant in a clear and erprints of the applicant may be taken by the County Sheriff's
SWEAR THAT THE ABOVE IS TRUE AND ACCURAT SIGNATURE OF APPLICA	

Form Revision 5/2013