

Freeport Police Department

320 West Exchange Street Freeport, Illinois 61032 Phone (815) 235-8222 Facsimile (815) 235-8235



SOLICITATION REQUIREMENTS

ALL APPLICANTS:

Under Freeport City Ordinance 864.02; Solicitors, Certificate of Registration Required, Application. Part of the criteria involves a criminal background check that will be conducted on the applicant. In order for the Freeport Police Department to conduct a criminal background check, the applicant will need to be fingerprinted at the Freeport Police Department.

The applicant will need to complete and submit to the Freeport Police Department the attached form with a check for the State's processing fee of \$51.25, made payable to:

City of Freeport Police Department

When submitting the completed application with the applicable fee, please notify the Police Department representative that you need to be fingerprinted for a <u>SOLICITOR license application</u>.

Applications and fingerprints will be submitted at least 30 days PRIOR to the requested solicitation period. Solicitation Licenses will only be valid for 30 days. Renewals must be requested in writing with a copy of the original application attached. The cost to renew is \$20.00, payable by check made payable to "City of Freeport Police Department."

REQUIRED DOCUMENTS: Every applicant must provide a legible copy of the following:

- 1) Completed Freeport Police Department "Registration for Solicitation" form
- 2) Copy of a valid driver's license or State issued identification card
- 3) Copy of a valid vehicle registration and proof of insurance for EACH vehicle which will be used by the license holder(s)

The Solicitation License DOES NOT allow for:

- 1) High pressure sales tactics
- 2) After-hours solicitation; Hours of solicitation are Monday-Saturday 9 am 8 pm. Solicitation is prohibited anytime on Sundays or State/National holidays
- 3) Soliciting in locations where signs prohibit solicitation

Failure to comply with solicitation guidelines will result in the application being denied or license being revoked.

Thank you.



DCN#:

REGISTRATION FOR SOLICITATION

Registration #:						Registration Expires:					
Application must be returned to the Freeport Police Department, 320 W. Exchange St., Freeport, IL, along with a check payable to City of Freeport Police Department in the amount of \$51.25 .											
REQUIRED at 1. LiveScan fingerprinting											
the time of 2. Copy of VALID driver's license or state issued identification card Application: 3. Copy of VALID vehicle registration and proof of incurrence for each vehicle wood by license holder.											
Application: 3. Copy of VALID vehicle registration and proof of insurance for each vehicle used by license holder											
*** PROVIDING FALSE INFORMATION WILL VOID THE LICENSE TO SOLICIT ***											
Dates of Solicitation: Pro				Solicitation A	pplication	:	Description of Materials Being Sold:				
Business Name	2:						•		Phone #	# :	
Business Street Address:						City/State:				ZIP:	
Form of Solicit	ation:	O Door to	Door (Busine	esses	Other (explain)				1	
Are you part o			○ Yes	s ON	o If Y	If YES, how many are in your group:?					
Name and Phone # of Individual in charge of group: Email Address:											
SOLICITOR'S INFORMATION											
LAST Name:					FIR	FIRST Name:				MIDDLE Name:	
Street Address:						City/State:				ZIP:	
Date of Birth: SSN:				Driver's			's License # and State Issued from:			Driver's License Expiration Date:	
Phone #: Scars, Marks, and Tattoos:											
Sex: Race:			Height:			Weight: Hair Colo		Hair Color:	Eye Color:		
Vehicle Year:			Vehicle Make:			Vehicle Model:		:	Vehicle License # & State:		
Have you ever been convicted of a felony?											
Have you ever been issued a certificate that was later revoked? Yes No											
Have you ever					If YES, I	ist all c	onvictions:				
violation of any provisions of this chapter or ordinance or any other Illinois municipality regulating soliciting?											
I affirm that all the answers given in the application are correct and made for the purpose of obtaining a license to solicit. I authorize you to communicate with any person, firm, or corporation necessary to try and obtain any information as you may need concerning the statements made in this application. I also agree that this application will remain your property whether or not the license is granted:											
Signature of Applicant						Date					
			***	POLICE D	EPART	MEN	IT USE ONL	Y ***			
Application Received: Fee paid Scan						f License Vehicle Registration/Insurance Fingerprints:					
Criminal History: Chief of Police Signature:											