

FOR OFFICE USE ONLY	
PAID #:	_____
RECEIPT #:	_____
DATE:	_____
REC'D BY:	_____

Solicitor's Permit Application

IF APPLICANT IS AN INDIVIDUAL:

Name

Company

Local Company Address (include zip code) Telephone

Local Residence Address (include zip code) Telephone

Permanent Address (if different from above) Telephone

Taxpayer ID or Social Security Number

Date of Birth Race Sex: M/F DL# State

IF APPLICANT IS A PARTNERSHIP:

Name of Partnership Taxpayer ID#

Address Telephone

List in the space below all partners:

Name and title

Principal business address Telephone

Name and title

Principal business address Telephone

IF APPLICANT IS A CORPORATION/ASSOCIATION:

Name of Corporation/Association

Mailing Address

Taxpayer ID#

Individual in charge of Plano office Title

Local mailing address

Residence address Telephone

Date of Birth Race Sex: M/F DL# State

List in the space below all officers/directors of trustees:

Name and title

Principal business address Telephone

Name and title

Local Residence Address (include zip code) Telephone

Name and title

Principal business address Telephone

All information provided by the applicant is subject to verification by the Plano Police Department.
A non-refundable \$20.00 application fee must accompany each application as established by ordinance.
 Application fee is not required of duly authorized, non-profit charitable organizations.



Solicitor's Permit Application

I swear of affirm that I have carefully read the application and that all information contained herein is true and correct. I understand that failure to provide all information requested or providing false information is grounds for denial or revocation of permit or certificate. If a permit is granted, it will not be used as, or represented to be, an endorsement by the City of any of its officers or employees.

Date: _____

Signature: _____

Title: _____

STATE OF TEXAS
COUNTY OF COLLIN
(if executed by an individual)

BEFORE ME, the undersigned, a Notary Public in and for said County and State, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purpose therein stated.

(If executed by a Corporation/Partnership or Association)

BEFORE ME, the undersigned, a Notary Public in and for said County and State, on this day personally appeared _____, known to me to be the person and officer whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same as the act of said (Corporation/Partnership/Association) for the purposes therein expressed and in the capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this the _____ day of _____, 20____.

Notary Public in and for the State of Texas

