

SOLICITATION PERMIT APPLICATION CHECKLIST

- **Complete the Solicitation Permit Application (one per soliciting group)**
- **Complete an Applicant Information packet for each person** soliciting
 - Provide a photo ID for each person soliciting
 - Provide a fingerprint background check from the State Highway Patrol for each person soliciting (must be from the state where the driver's license was issued)
 - □ Provide auto insurance for each vehicle being used

Once the paperwork has been completed:

□ Bring all paperwork and documentation for ALL solicitors to the Ballwin Police Department. We cannot accept the packet unless it is complete.

PLEASE ALLOW 7-10 DAYS FOR PROCESSING BEFORE THE DATE YOU PLAN TO START SOLICITING.

- □ Your paperwork will be entered in the computer and sent for a local background check.
- □ We will call when your permit has been approved and tell you the total amount due.
- Once payment is received, an officer will create a photo ID/permit for each solicitor.
 YOU CANNOT SOLICIT WITHOUT THIS PHOTO ID. Doing so will result in the revocation of your solicitation permit, whether or not you have already paid.



SOLICITATION PERMIT APPLICATION

ONLY ONE COPY OF THIS FORM NEEDS TO BE SUBMITTED FOR THE OVERALL SOLICITATION PERMIT APPLICATION

- Solicitation fees are \$20.00 per person, per day, except for Non-Profit or Charitable Organizations.
- An additional one-time fee of **\$5.00** per person will be charged for the Solicitation Permit Card.
- Solicitation prohibited where "No Trespassing" or "No Solicitors" or similar sign has been posted.
- Solicitation hours: 9:00 a.m. until one-half hour after the time designated as sunset published for that date in the St. Louis Post-Dispatch or 7:30 pm, whichever is earlier.

SPONSORING ORGANIZATION

Name of Business/Organiza	tion Sponsoring Solicitors:		
Address of /Business/Organi	zation:		
Phone Number of Business/	Organization:		
Purpose of Organization:	Corporation		
	□ Non-Profit/Charitable		
	□ Other (please specify)		
Proposed soliciting activity/p	roducts offered:		
Dates of solicitation campaig	n within a 30 day period:		
Number of people soliciting	n Ballwin during campaign:		
	(A	n Applicant Informa	tion Form must be submitted for everyone who will be soliciting.)
IF FUNDS ARE TO BE SOL	ICITED:		
Organization or person with the second	no can provide a prospective d	onor with more inforr	nation about the use of such funds:
Name:	Name: Phone Number:		
Permanent Address:			
 Information about the corr 	pany, organizations or persons	who will receive dor	ations or profits (if different from sponsoring company):
Name:			Phone Number:
CONTACT PERSON ON DA			
	TS OF SOLICITATION.		Dhone Number
			Phone Number:
Printed Name of Applicant		Phone	Date
			2010
Signature of Applicant		Email	

OFFICE USE ONLY
PERMIT #
TOTAL DUE: \$
APPROVED DENIED
By

APPLICANT INFORMATION

OFFICE USE ONLY		
PERMIT #		EXT
PD	CRTCK	

MUST BE SUPPLIED FOR EACH INDIVIDUAL WHO WILL BE SOLICITING

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- Solicitation prohibited where "No Trespassing" or "No Solicitors" or similar sign has been posted.
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Last Name:	First Name:
Middle Name:	Alias/Nickname:
Home Address:	
Local Address:	
Home Phone:	Cell Phone:
Place of Birth:	Social Security Number:

A copy of photographic identification has been submitted with this application. The form of photographic identification presented is (check one):

□ Other (please specify)

Driver License	State Identification Card	Passport
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VEHICLE INFORMATION

Please provide the following information for each vehicle used by the applicant during the proposed solicitation activity.

MAKE/MODEL	YEAR	COLOR	VEHICLE IDENTIFICATION #	PROOF OF INSURANCE	STATE / LICENSE PLACE #

Have you ever been convicted of any felony or misdemeanor (excluding minor traffic offenses) and if so, the nature of the offense, the penalty imposed and when and where the conviction(s) occurred.

🗆 No

□ Yes

Have you ever had a solicitation permit denied or revoked by any other governmental entity, and if so, the name of each governmental entity denying or revoking said license, the reason for each denial or revocation and the date(s) of same.

🗆 No

□ Yes

DATES OF SOLICITATION ((MUST BE CONTIGUOUS)

A fingerprint criminal record check from the Missouri State Highway Patrol (or the home state of the applicant, if not in Missouri) has been submitted as part of the application process.

I understand that a criminal record check will be conducted. Applicants who have open arrests must obtain a notarized record check from the Missouri Highway Patrol Records Division. Permits will be issued dependent upon a criminal history check.

Signature of Applicant

Date

GUIDELINES FOR SOLICITATION WITHIN THE CITY OF BALLWIN

Apply in person: Ballwin Police Department 300 Park Dr Ballwin, MO 63011 Phone: 636-227-9636

- 1. A fingerprint criminal record check from the Missouri State Highway Patrol is required as part of the application process. This must be included with the application form, along with a copy of the solicitor's driver's license.
- 2. All persons who have been approved to solicit must appear in person with identification (if applicable) during business hours to receive his/her permit card.
- 3. Solicitation permit cards must be carried and displayed at all times.
- 4. Solicitation is prohibited in commercial areas, or where "No Trespassing" or "No Soliciting" or similar signs are posted.
- 5. Should the City receive any complaints of aggressive selling tactics or harassment, the City reserves the right to revoke your permit cards immediately and without refund.
- 6. **Hours for solicitation are as follows without exception:** 9:00 a.m. until one-half hour after the time designated as sunset published for that date in the St. Louis Post-Dispatch, or at 7:30 p.m., whichever is earlier.
- 7. All solicitation permit cards must be returned at the end of your approved final day of solicitation. If this is after business hours, you may use the drop box located in the vestibule of the Government Center.

I AGREE TO ADHERE TO THE ABOVE SOLICITATION GUIDELINES.

Signature of Applicant

Date

Printed Name of Applicant

SOLICITATION PERMIT NUMBER