

**VILLAGE OF BEVERLY HILLS  
SOLICITING APPLICATION**

Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Local Address (if applicable) \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Company Phone \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Vehicle: Year/Model/License Plate # \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver License Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Gender \_\_\_\_\_

Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_ Birth Place \_\_\_\_\_

Citizenship \_\_\_\_\_

Type of Solicitation:

Product \_\_\_\_\_ Membership \_\_\_\_\_ Donation \_\_\_\_\_ Other \_\_\_\_\_

Please give a detailed description of solicitation:

\_\_\_\_\_

Place where goods are manufactured: \_\_\_\_\_

Place where goods are stored: \_\_\_\_\_

Proposed method of delivery: \_\_\_\_\_

Health Department Permit # (if applicable): \_\_\_\_\_

Solicitation start date \_\_\_\_\_ End date \_\_\_\_\_

Have you ever been convicted of a felony, misdemeanor or violation of any municipal ordinance? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when \_\_\_\_\_

What was involved: \_\_\_\_\_

\_\_\_\_\_

I, the aforementioned applicant, swear that all statements in this application are true to the best of my knowledge and that I understand the provisions of the applicable ordinances and will endeavor to adhere to these provisions.

Witness \_\_\_\_\_ Applicant signature \_\_\_\_\_

Date \_\_\_\_\_

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**For Office Use Only**

Fee Paid \_\_\_\_\_

Proof of Charitable Status \_\_\_\_\_

Organization Verified Yes \_\_\_ No \_\_\_

Contact person \_\_\_\_\_ Phone number \_\_\_\_\_