

20___ SOLICITOR PERMIT

\$200 Application fee Or \$25 for each solicitor

ALL FEES ARE NON REFUNDABLE

Name of Solicitor: _			
Home Address:			
City:S		Zip Code:	
Phone #:	Cell Phone #:	D.O.B	
Name of Business: _			
Business Owner:			
Address:			
City:	State:	Zip Code:	
Phone #:	Cell Pho	Cell Phone #:	
Гах Id #:			
Mailing Address (if o	different from above):		
City:	State:	Zip Code:	
Description of goods	and / or services:		

Copies of the following documents	ments must be submitted with all appl	lications.
Two (2) 2X2 Passport	photos	
Valid Photo ID		
Signed Rules & Regu	lations	
Police ID Bureau (732-988-8) they may be fingerprinted. must obtain the proper forms Failure to obtain the proper rethis ordinance will constitute	itted each applicant must contact to 8000 extension 426) for the appropriate from the ID Bureau. egistrations or to follow the rules and a violation of township Ordinance # ay and/or imprisonment for a period	iate documents so that outside source but you regulations set forth by 1576 and is punishable
	tinues will be considered a separate	
I have read and understand th	e above statements.	
Signature of Applicant	Print	Date
Make checks payable to Mail payment to	TOWNSHIP OF NEPTUNE Neptune Township Mercantile Regis Attn: Michele Narciso PO Box 1167 – 25 Neptune Blvd Neptune, NJ 07754-1167	tration