



# Darien Police Department

25 Hecker Avenue  
Darien, CT 06820-5398  
Tel: (203) 662-5300 Fax: (203) 662-5344

## Solicitor Application

Please check one of the following:     Vendor         Peddler

Full Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

### Home Address:

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

### Local Address:

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Name of Soliciting Firm You Are Representing: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone #: \_\_\_\_\_

Connecticut Sales Tax #: \_\_\_\_\_ (Required C.G.S. 12-409)

Have you ever been convicted of any crime or misdemeanor? Y N

(if Yes, list date, location and charges) \_\_\_\_\_

What are orders being solicited for? \_\_\_\_\_

When taking orders for future delivery, is full payment required at time of solicitation? Y N

How long will you be soliciting? \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

(State of Connecticut        }  
  } s.s. \_\_\_\_\_  
(County of Fairfield        } )

Subscribed to and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Application approved by Darien Police Department by: \_\_\_\_\_

Non-transferable \$10.00 Fee

**THIS PERMIT EXPIRES:** \_\_\_\_\_