



APPLICATION FOR PEDDLER'S PERMIT

City of Jacksonville, Illinois
City Clerk's Office – Skip Bradshaw, City Clerk
200 West Douglas Avenue
Jacksonville, Illinois 62650
Phone: (217) 479-4613

(At least 24 hours or more will be necessary to process application)

Date of Application _____ IL Retailer's Occupation Tax No. _____
F.E.I.N. _____ for business.

Dates sales to be conducted _____ to _____

Permit fee \$ _____ for _____ number of people soliciting door to door.

Name of Business represented _____ Telephone _____

Contact person: _____

Address of Business: (street, p.o., city, state) _____

Name of Applicant _____
(name of person who will conduct business or who is coordinator of sales in Jacksonville)

Address of Applicant _____

Telephone _____ Social Security Number _____ Birth date _____

Driver's License No: _____ State Issued: _____ Date Issued: _____

Transportation to be used-include all vehicles

Model of vehicle _____ Color _____ Year _____ License Plate No. _____

Attach a 2"x2" photograph (head and shoulders only)-taken within the last 6 to 12 months – for each person to be covered by license

List any additional people involved with solicitation (attach additional sheet if necessary):

1) Name (F,M,L) _____ 2) Name (F,M,L,) _____

Address: _____ Address: _____

Driver's Lic.# _____ Driver's Lic.# _____

Social Security # _____ Social Security # _____

Birth Date _____ Birth Date _____

Has anyone, to be covered by this permit, ever been convicted of any crime, misdemeanor or violation of municipal ordinances? ___yes ___no

If YES, state the name of the person involved, the nature of the offense and the punishment/penalty:

Description of the goods to be sold _____

Merchandise is _____ perishable _____ non-perishable

Estimate gross sales expected: \$ _____ Were goods purchased by applicant or solicitors? ___yes ___no

Process of sale and area in Jacksonville to be covered:

Advertising has been or will be done concerning the sales: ___yes ___no

Attach a sample of marketing and advertisements to be used during sales.

The undersigned swears that all information and attachments are true and correct.

Signature of Applicant

Subscribed and sworn to before me, this _____ day of _____, _____

(SEAL)

Notary Public

Approved Disapproved
JACKSONVILLE POLICE DEPARTMENT

Approved Disapproved
CITY CLERK, CITY OF JACKSONVILLE

Officer

City Clerk

Service of Process:

In consideration of issuance to me of a Peddler's Permit, pursuant to Chapter 21 of the Municipal Code of the City of Jacksonville, I, _____, nominate the City Clerk of the City of Jacksonville, Illinois, as my true and lawful agent with full power and authority to acknowledge service of notice or process for and on my behalf in respect to any matters connected with or arising out of the business transacted under said permit, and I do hereby consent and agree that service of any notice or process may be made upon said agent, and when so made shall be taken and held to be valid as if personally served upon me, according to the law of this or any other state, hereby waiving all claim or right or error by reason of such acknowledgement of service or manner of service. Immediately upon service of process upon the City Clerk, as herein provided, the City Clerk shall send to me, at my address as shown on this application, or at any address I hereafter provide in writing to the City Clerk, by registered mail, a copy of said process.

Signature of Applicant

Date

Signature of Witness

Request received in City Clerk's Office on _____, _____
Fee Paid \$ _____