



**TOWN OF CORTLAND**  
**59 Somonauk Rd., P.O. Box 519, Cortland, IL 60112-0519**  
**(815) 756-3030**

## PEDDLERS & SOLICITORS PERMIT APPLICATION

Date	<b>Permit Applied For:</b> <input type="checkbox"/> Peddler <input type="checkbox"/> Solicitor	<b>Have you ever had a Permit from Cortland?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Have you ever had a permit revoked?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Background Check Attached:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name: First, Middle Initial, Last				
Local Address				
Permanent Address (if different from above)				
Age	Sex	Date of Birth	Height	Weight (pounds)
Color of Hair	Color of Eyes	Scars or Marks		<b>IL. Driver's License?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
License Plate Number, State, and Year		Year, Make, Model, and Color of Motor Vehicle		
Nature of Goods, Wares, and Merchandise offered for sale				
Name of Firm for or on whose behalf the orders are solicited, or the supplier of the goods involved				Illinois Business Tax #
Address of Firm				How long with company
Will you be accompanied by any other person(s)				How Many
<b>If the above person has been convicted of any felony, enter below:</b>				
Nature of Crime				
Where Committed		When	Penalty	
Nature of Crime				
Where Committed		When	Penalty	
Date and Status of Previous Cortland Peddler's License or Solicitor's Certificate			Convictions for violating solicitor's ordinance in any Illinois municipality	
Applicant wishes to start on			Will finish	
Signature of Applicant			Business Telephone Number (     )	Home Telephone Number (     )
<b>OFFICE USE ONLY</b>				
Application Fee Submitted	Permit #:	Date of Issue	Issued by	Expiration Date
Approved by:  _____			Date Approved:	
Signature				