



**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 from any municipality?</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	IL Driver's License? <input type="checkbox"/> YES <input type="checkbox"/> NO	
License Plate Number, State		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

**If the above person has been convicted of any felony, enter below:**

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

**OFFICE USE ONLY**

Application Fee Submitted	Permit #:	Date of Issue	Issued by	Expiration Date
Approved by: _____ Signature			Date Approved:	