



# CANTON POLICE DEPARTMENT

45 RIVER ROAD  
CANTON, CONNECTICUT 06019  
860-693-0221



## PEDDLERS AND SOLICITOR'S APPLICATION

Please read through the application instructions to ensure all documents are in order. You are not able to solicit or vend in the town of Canton until the permit is approved.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Applicant Information: DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Weight: \_\_\_\_\_ Height: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone # of Employer: \_\_\_\_\_ State Tax ID # \_\_\_\_\_

Nature of Goods, Wares, Merchandise: \_\_\_\_\_

Present Location of Merchandise: \_\_\_\_\_

Delivery Method of Merchandise: \_\_\_\_\_

Do you have Written Permission from the Property Owner: \_\_\_\_\_ ; If YES, please provide copy.

Vehicle(s): Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ Plate # \_\_\_\_\_ State: \_\_\_\_\_

Have You Ever Been Arrested: \_\_\_\_\_. If you answered YES please explain on the reverse side all arrests within the last five (5) years. Include the arrest date, town, state, criminal charge(s), and the court disposition.

Have you or your employer ever been sued in a civil court action alleging fraud or misrepresentation: \_\_\_\_\_ If you answered YES, please explain on the reverse side.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chief of Police: \_\_\_\_\_ Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Date of Approval: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_

Date Permit Expires: \_\_\_\_\_

Fee Schedule: \_\_\_\_\_ One day (\$25) \_\_\_\_\_ One week (\$50) \_\_\_\_\_ Six Months (\$100) \_\_\_\_\_ One Year (\$200)