



**TOWN OF SHIRLEY
POLICE DEPARTMENT**

Application for Permit to Solicit

According to By-Laws of the Town of Shirley

Article XXII, Section 1 through 11

Name _____ Address _____

City or Town _____ State _____

Height _____ Weight _____ Hair Color _____ Eye Color _____

If you are residing temporarily in the area at what address (Street, City and State) _____

License # _____

Social Security # _____ Vehicle Make Color & Registration _____

Date of Birth _____ Place of Birth _____

Mother's Maiden Name _____ Father's Name _____

Nature of Business & Goods to be Sold for which permit is requested

Name of Company being represented _____

Address _____ City _____ State _____

If a member of a group, name of person in charge _____

Have you ever been convicted of a crime in this or any other state? _____

If so, state when and where _____

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Signature of Applicant _____ Date _____

For Department Records Only

Application approved by _____ Date Permit Issued _____

Application disapproved by _____ Reason _____

Application Fee \$2.00 (At time of application) _____

One Application per Solicitor