

CITY OF STAFFORD

REGISTRATION STATEMENT

For any Peddler, Solicitor, Canvasser, or Itinerant Vendor.

Name of Applicant: _____
Last First Middle

Height: _____ Weight: _____ Sex: _____ Hair Color: _____

Social Security #: _____ - _____ - _____ Drivers License #: _____ State: _____

Permanent Home Address (Street): _____

City, State & Zip: _____

Local Address (Street): _____

City, State & Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Have you ever been convicted of a felony or misdemeanor involving moral turpitude? Yes No

If yes, separately list and explain the nature of each and every conviction, give the State where the conviction occurred and the year of conviction.

Applicant's Signature: _____ Date: _____

Business Information

Name of Firm: _____

Permanent Address (Street): _____

City, State & Zip: _____

Local Address (Street): _____

City, State & Zip: _____

List the last (4) communities in which business was conducted by the Firm, with the period (start and ending month / year):

From Month / Year To Month / Year Name of Community

From Month / Year To Month / Year Name of Community

From Month / Year To Month / Year Name of Community

From Month / Year To Month / Year Name of Community

Describe the business and related activities to be conducted: _____

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Applicant's Signature: _____ Date: _____

**Check List
(To be attached to application form)**

- _____ Certified copy of Charter or Articles of Corporation or; (if not incorporated under the laws of this State)
- _____ Certified copy of authority to do business in this State
- _____ Description of each individual who will be involved in business under the registration certificate (individuals must present a current driver's license)
- _____ Description of each vehicle that will be operated under the registration certificate
- _____ \$5.00 Registration Fee
- _____ Photograph – Must be a recent color or black and white photo, no larger than 2"x2"

FOR OFFICE USE ONLY:

Date Received: _____ Application complete: Y N Processed by: _____