CITY OF VERONA

SOLICITOR'S REGISTRATION

FEE: $20.00 DATE:_____

C.I.B: $7.00 CR# :_____

PLEASE PRINT CLEARLY

NAME:_____ DATE OF BIRTH:_____

FIRST M.I. LAST

HOME ADDRESS:_____

STREET CITY STATE ZIP

DRIVER'S LIC. NO.:_____ STATE:_____ EXP:_____

HEIGHT:____WEIGHT:___HAIR COLOR: _____EYES: _____RACE:_____SEX:__

PHONE WHERE APPLICANT CAN BE REACHED AFTER LEAVING VERONA:_____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME, MISDEMEANOR, OR VIOLATION OF ANY ORDINANCE OTHER THAN TRAFFIC VIOLATIONS [7-4-4(A)(10)]?

NO____ IF YES, EXPLAIN:_____

NAME & ADDRESS OF ORGANIZATION:_____

CREW MANAGER NAME & PHONE NO.:_____

LENGTH OF SERVICE WITH ORGANIZATION:_____

LENGTH OF TIME TO BE IN VERONA:_____THROUGH_____

DATE DATE

LICENSE NO., MAKE, MODEL, AND DESCRIPTION OF VEHICLE TO BE USED:

_____

NATURE OF BUSINESS TO BE CONDUCTED:_____

PREVIOUS CITIES, TOWNS, VILLAGES, WHERE BUSINESS WAS CONDUCTED, NOT TO EXCEED (3)_____

I DO SOLEMNLY AFFIRMTHAT ALL INFORMATION HEREON CONTAINED IS TRUE AND CORRECT.

APPLICANT SIGNATURE_____

**FALSE STATEMENTS WILL RESULT IN DENIAL OF OR IMMEDIATE TERMINATION OF THE PRIVELAGE TO SOLICIT IN THE CITY OF VERONA, WISCONSIN. [7-4-9(A)]*

OFFICE USE ONLY

TO: LAW ENFORCEMENT

SUBJECT: SOLICITOR'S PERMIT FOR:_____

I HAVE REVIEWED THE ABOVE REGISTRATION FORM AND HAVE FOUND THE FOLLOWING LEGAL VIOLATIONS HAVE OCCURED INVOLVING THE APPLICANT. (DO NOT LIST MINOR TRAFFIC) [7-4-5(A)]_____

_____

_____

NO C.I.B. RECORD RECOMMENDATION: **APPROVED** **DISAPPROVED**

DATE:_____ _____

CHEIF OF POLICE