



NAUGATUCK POLICE DEPARTMENT
 211 Spring Street
 Naugatuck, Connecticut 06770
 203-729-5221



Rev. 1/2010

APPLICATION FOR SOLICITATION PERMIT

Date of application: _____

Applicant's full name: _____

address: _____

date of birth: _____ sex: _____ Height: _____ Weight: _____

eye color: _____ hair color: _____ Phone #: _____

Attach
Valid
Identification

Business full name: _____

address: _____

nature of business: _____

goods to be sold: _____

solicitation dates: _____ to _____ vending hours: _____ to _____
Not to exceed one (1) year

location(s) of solicitation: _____

description of business vehicle (if applicable):

Plate #: _____ Year: _____ Make: _____ Model: _____ Color: _____

List of all criminal convictions:

Date	Charge	Location	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I swear, under penalty of law, that this statement is the truth to the best of my knowledge. I understand that I must comply with the regulations set forth in Section 19 of the Code of Ordinances of the Borough of Naugatuck.

Signature of Applicant _____

Application Approved / Denied

_____ Date

_____ Authorized Official