

LURAY POLICE DEPARTMENT

Commercial Solicitor Permit Application

Do not apply unless you can provide proper personal identification. You must have a current valid driver's license or DMV State Issued ID card.

All Commercial Solicitors shall fully comply with Town Code Section 30-1 – Solicitation of Residents

| Applicant Information | | | |
|-----------------------------|------------|----------------|--|
| Name: | | Date of Birth: | |
| Home Address: | | | |
| Email: | | Phone: | |
| Driver's License No. | | Issuing State: | |
| Sex: | Race: | Height: | |
| Weight: | Eye Color: | Hair Color: | |
| Place of Birth: | | | |
| Company Information | | | |
| Company Name: | | Company Phone: | |
| Company Address: | | | |
| Supervisor: | | | |
| Product/Service: | | | |
| Visitation Information | | | |
| Length of Time to Solicit i | n Luray: | | |
| Locations to Solicit: | | | |
| Vehicle Information | | | |
| Make: | Model: | Year: | |
| Color | State | Plate No. | |

| Name: | Phone: |
|--|--|
| Address: | |
| Name: | Phone: |
| Address: | |
| Physical Condition | |
| I affirm that I have no contagious, infectious, or communicable diseases. | Yes No |
| Criminal Record Information | |
| Have your ever been charged with or convicted of any of the following ca | rimes? If so, explain. |
| Felony: | |
| Drugs/Narcotics: | |
| Moral Turpitude: | |
| Fraud/Misrepresentation: | |
| Threats: | |
| AFFIDAVIT FOR RELEASE OF INFORMATION | |
| I hereby give consent and authorize the Town of Luray Police Department Records Exchange for any criminal history record and report the results authorized in this document to receive same. I swear (affirm) that all of the above information is true and correct to the I understand that it is unlawful for any person to make a false statement of statement shall constitute grounds for denial of the application, revocation. | s of such search to the agent or individual e best of my knowledge. On this application and discovery of a false |
| Applicant Signature: | Date: |
| FOR POLICE DEPARTMENT USE O | |
| Payment | |
| Fingerprinted | |
| Photographed | |
| Criminal Record Review | |
| Application Review | |
| Comments | |
| Approval Status | |