

**REQUIREMENTS** 

# **CHECKLIST FOR SOLICITOR'S PERMIT**

 Application for Solicitor's Permit
 Violation Statement
 Credentials establishing relationship with employer
 Division of Corporations filing (Fictitious name, LLC, Corporation)
 Valid Driver's License or other form of picture identification
 2 Passport style photographs (must be taken no more than 60 days prior to applying for permit
 Penal Bond in the mount of \$1,000 insured (Ord. 59-09, Section 13-25).
 Fingerprint card (Hours of operations for fingerprinting are Monday thru Friday 11AM until 2 PM). Please contact Police Department Records at 239-574-0695 if you are sending a group of people to get fingerprinted.
 Liability Insurance Certificate showing City of Cape Coral as additional insured (Ord. 59-09 Section 13-26)
 Payment for the permit will be required before issuance, fee is determined by the period the permit is requested for



#### CITY OF CAPE CORAL

### **CITY CLERK DEPARTMENT - BUSINESS TAX RECEIPTS DIVISION**

SOLICITOR'S PERMIT #\_\_\_\_\_

#### PLEASE PRINT ALL INFORMATION

Name:(Last)	(First)	(Middle)				
Telephone:	Social Security	:				
Florida Driver's License Number:	(copy attached)	<del></del>				
Applicant's Present Address:						
Physical description:						
Height: Weight:	Color of eyes:	Color of Hair:				
Present Employer:						
Present Employer's Address:						
Occupation:						
Period of Time Engaging in Business within the City:						
Upon sale or order, will you demand, accept, or receive payment or deposit of money in advance of final delivery?						
Goods, wares, merchandise or services being offered:						
Location where goods or property proposed to be sold or orders taken for sale are manufactured or produced:						
Location where such goods or products are located at the time the application is filed and proposed method of delivery:						



## CITY OF CAPE CORAL

Last five cities or towns wherein the applicant ha	as worked before coming to this city:
1	-
2	-
3	-
4	-
5	-
It is agreeable that any untruth or misstatement fraud, and sufficient reason for revocation of any be processed in accordance with Ordinanceto me, I shall accept same, subject to all conditions,above statements are true and correct.	y permit to the applicant. This application shall It is agreeable if the permit is issued ons in Ordinance
(Applicant's Signature)	(Date)
STATE OF <u>FLORIDA</u> , COUNTY OF <u>LEE</u>	
Before me this day personally appearedsworn, deposes and says that the application before me this day of	is true and correct. Sworn to and subscribed
Notary Public, State of Florida	
(Seal)	





## **VIOLATION STATEMENT**

misdemeanor or violation of any State or Federal law or Municipal Ordinance of this Code, the nature of the offense, the punishment or penalty assessed, and the place of the conviction.