

**MIDDLETOWN TOWNSHIP POLICE DEPARTMENT**

OFFICIAL USE ONLY

Approved \_\_\_\_\_

Expires \_\_\_\_\_

Amt. Pd. \$ \_\_\_\_\_

**SOLICITING AND TEMPORARY/TRANSIENT BUSINESS LICENSE APPLICATION**

Full Name \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Home Phone # \_\_\_\_\_

Vehicle License # \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

Were you ever convicted of a crime? \_\_\_\_\_ If so, when? \_\_\_\_\_

Where? \_\_\_\_\_ Nature of Offense \_\_\_\_\_ Penalty Imposed \_\_\_\_\_

Name of Firm/Charitable Organization Represented \_\_\_\_\_

Address \_\_\_\_\_ Business Phone# \_\_\_\_\_

Product Presented \_\_\_\_\_

Will the conducting of this business/solicitation in any way endanger the safety or welfare of the residents of Middletown Township? \_\_\_\_\_

Purpose of Charitable Funds Solicited \_\_\_\_\_

How many employees do you employ? \_\_\_\_\_ Do you certify your employees to be of good moral character? \_\_\_\_\_ How many minors employed? \_\_\_\_\_

I certify that my answers to the foregoing questions are true and complete. (Any false statement made in application will be grounds for disqualification and criminal prosecution.)

\_\_\_\_\_  
Signature

Recent 1"x1½" photo required with application.

Applications take 48 hours for processing. If approved, identification card will be available at the office of the Chief of Police.

Soliciting hours: 9:00 AM to 8:30 PM – Monday through Saturday  
10:00 AM to 8:30 PM – Sunday

Fees for 30 days: Soliciting for profit - \$100.00; non-profit - \$3.00