

CITY OF REDWOOD CITY - Permit Application for Solicitor Peddler (Ice Cream)

I, the undersigned, in accordance with the applicable Redwood City Code, hereby make an application for a permit as indicated and affirm that the following information is true: **PLEASE PRINT**

NAME		ALIAS	
ADDRESS		CITY	STATE ZIP
HOME PHONE NO.		WORK PHONE NO.	CELL PHONE NO.
DATE OF BIRTH	SEX	RACE	HEIGHT WEIGHT HAIR EYES
DRIVER'S LICENSE NO.		STATE	SOCIAL SECURITY NO.
MARKS/SCARS/TATTOOS		AMPUTATION	
BIRTHPLACE		CITIZENSHIP	
EMPLOYER		OCCUPATION	
ADDRESS		PHONE NO.	
NAME OF <input type="checkbox"/> FRIEND <input type="checkbox"/> RELATIVE		RELATIONSHIP, IF A RELATIVE	
ADDRESS		PHONE NO.	
TYPE OF VEHICLE YOU ARE DRIVING:			
YEAR	MAKE	MODEL	COLOR LICENSE PLATE NO. STATE
CURRENT REGISTERED OWNER OF VEHICLE			
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete the following:			
NATURE OF OFFENSE			
DATE OF OFFENSE	PENALTY	WHERE CONVICTED	
HEALTH STATEMENT			INITIALS
I certify, to the best of my knowledge, I am free of any infectious, communicable disease.			
COUNTY HEALTH DEPARTMENT CERTIFICATE - I understand it is my responsibility to check with the County Health Department and obtain a County Health Department Certificate, if required, before I commence conducting business in accordance with my permit.			INITIALS
BUSINESS LICENSE			INITIALS
I understand it is my responsibility to check with the City Business License Collector, and obtain a business license, if required, before I commence conducting business in accordance with my permit.			
WHO ARE YOU REPRESENTING?			SELF EMPLOYED? <input type="checkbox"/> Yes <input type="checkbox"/> No
ADDRESS		CITY	PHONE NO.
WHAT ARE YOU SELLING/SOLICITING?			
WHAT MONTHS WILL YOU BE SELLING/SOLICITING?		WHAT DAYS WILL YOU BE SELLING/SOLICITING?	
HAVE YOU HAD A PRIOR PERMIT IN REDWOOD CITY? <input type="checkbox"/> Yes <input type="checkbox"/> No			EXPIRATION DATE
DO YOU HAVE PERMITS IN OTHER CITIES? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list the Cities:	

Applicant Signature

Date

POLICE DEPT USE ONLY				
Processing Fee Paid \$	Receipt #	Date	ATI #	By
Issued Permit #	Date Issued	Date Expires	By	