



TOWNSHIP OF HOPEWELL

MERCER COUNTY

201 Washington Crossing Pennington Road
Titusville, New Jersey 08560-1410

APPLICATION FOR SOLICITORS PERMIT

HOPEWELL TOWNSHIP ORD: 4:8

\$20.00 Solicitors Application Fee, non-refundable to be paid at time of application (HT Ord: 22-1784)

\$125.00 Solicitors Annual License Fee, due upon permit approval (HT Ord: 22-1784)

Note: For Solicitors Only!

If you are an honorably discharged veteran of the armed forces of the United States and a resident of the State of New Jersey, you are not required to apply for a license with this municipality. You may instead apply to the county clerk of the county in which you reside and receive a license to solicit anywhere in the State of New Jersey "free of charge." If you wish, you may also apply through this agency, but the required nonrefundable application fee noted above will be assessed.

Please Print or Type

Applicants Name: _____ Phone: _____

Home Address: _____

Company Name: _____ Phone: _____

Company Address: _____

Applicants Data:

Age _____ Sex _____ Height _____ Weight _____ Hair _____ Eyes _____

Date of Birth _____ Place of Birth _____

Social Security Number _____

Drivers License Number _____ State _____

Have you ever been convicted of any crime other than a motor vehicle violation? Yes _____ No _____ If yes, please explain on page 3 of this application.

Have you ever had a license denied? Yes_____ No_____ If yes, please explain on page 3 of this application.

List the last three places of residency:

Address:_____ Dates:_____

Address:_____ Dates:_____

Address:_____ Dates:_____

I, the undersigned applicant, understand the following parameters:

- 1) I must submit three (3) passport type photos of myself.
- 2) If granted this permit, my business will not interfere with the free flow of traffic on any public highway, street, alley or etc.
- 3) The nature of my business/what I intend to sell is:_____

And samples of same are available for inspection. Yes_____ No_____

- 4) A copy of my state of New Jersey sales tax certificate is attached (mandatory). Yes_____. Unless _____ My merchandise is not taxable.
- 5) I the undersigned applicant authorize any individual, company, person, or institution to whom I have been associated with to furnish the Hopewell Township Police Department with any information concerning my ability and character which they have on their record or otherwise, and do hereby release the individual, company, person, institution, and all individuals, and all individuals connected therewith from all liability for any damages whatsoever incurred in furnishing such information.
- 6) I do hereby swear that all of the information given by me in this application is true to the best of my knowledge and hereby apply for the aforementioned license. I also understand that it is a crime of the fourth (4th) degree for a person to make a false written application and/or statements for the purpose of misleading a public servant in accordance with N.J.S. 2C:28-3A.

Signature of Applicant	Date Submitted	Witness
------------------------	----------------	---------

Local Police Department Check (s): Any Record

_____ Yes_____ No_____

_____ Yes_____ No_____

_____ Yes_____ No_____

Local warrant and ATS check: _____ Record _____ No Record

Drivers License Check: _____ Valid _____ Expired _____ Suspended

SCIC/NCIC Check: _____ Record _____ No Record

Following space is to be used for any clarifications of previous inquiries:

Application: _____ Approved _____ Disapproved _____

Chief of Police or Designee

To be completed by municipal clerk's office:

License Number: _____

License Issued On: _____

Expires: _____

Municipal Clerk