

**BRISTOL, CONNECTICUT  
APPLICATION FOR SOLICITORS & CANVASSERS LICENSE**

**LICENSE NOT TRANSFERABLE**

FOR OFFICE USE ONLY

License # \_\_\_\_\_

Date of Issuance \_\_\_\_\_

Date of Expiration \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Name & Address of Employer \_\_\_\_\_  
\_\_\_\_\_

Business Phone \_\_\_\_\_

Attach 2" x 2" photo  
  
Taken within 60 days prior  
to date of application showing  
head and shoulders.

\_\_\_\_\_  
Signature of Applicant

Brief description of nature of business and goods to be sold \_\_\_\_\_  
\_\_\_\_\_

Location where products will be displayed \_\_\_\_\_

Method of delivery \_\_\_\_\_

If vehicle is to be used, give registration # \_\_\_\_\_

(Number)

(State)

Description of vehicle \_\_\_\_\_

(Make - Model - Color - Year)

Have you ever been convicted of any crime, misdemeanor or violation of any municipal ordinance? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, give details \_\_\_\_\_

Reference - Give names and addresses of two (2) reliable property owners in Connecticut who will certify as to your character and business responsibility, or in lieu thereof names of references and other evidence as to good character and business responsibility.  
\_\_\_\_\_  
\_\_\_\_\_

ATTEST: \_\_\_\_\_

(Signature of Applicant)

State of Connecticut

ss: Bristol

Date \_\_\_\_\_

County of Hartford

Sworn and subscribed to by the above named applicant.

\_\_\_\_\_  
(Notary Public)

**Annual Licenses Only. Must be renewed each year upon expiration.**

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All necessary approvals having been properly and fully executed as per ordinance (Sec. 17-16 through 17-42) license as peddler is granted to the above named applicant.

Investigation Fee \$15.00 \_\_\_\_\_

No Daily Rates Available

Annual License Fee \$75.00 \_\_\_\_\_

Monthly License Fee \$40.00 \_\_\_\_\_

After Jul. 1 - Dec. 31 Fee \$37.50 \_\_\_\_\_

Weekly License Fee \$10.00 \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

City Clerk

POLICE DEPARTMENT APPROVAL

Investigation having been made of applicant's character and business responsibility, the application of:

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(Name and Address)

Is hereby:                   **APPROVED**

**DISAPPROVED**

If disapproved, reason for disapproval \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_  
Chief of Police