



VILLAGE OF NEW BADEN
1 EAST HANOVER ST
NEW BADEN IL 62265
(618) 588-3813 FAX (618) 588-7105
www.NewBadenIL.com

SOLICITOR'S LICENSE APPLICATION

Date: _____

Applicant's Name: _____

Phone: _____

Applicant's Address: _____

City: _____

State: _____

Zip: _____

Length of Time at Above Address: _____

SSN: _____

Date of Birth: _____

Driver's License # & State: _____

Business Name: _____

Phone: _____

Business Address: _____

City: _____

State: _____

Zip: _____

Length of Employment: _____

All Residences and Address for the last three (3) years if different from above:

Name and Addresses of Employers during the last three (3) years if different than above:

List the last three (3) municipalities where the applicant carried on business immediately preceding the date of application:

A description of the subject matter that will be used in the applicant's business:

Has the applicant ever had a license in this municipality? Yes No

If so, when? _____

Has a license issued to this applicant ever been revoked? Yes No

If "yes", explain: _____

Has the applicant ever been convicted of a violation of any of the provisions of this Code or the regulations of any other Illinois municipality regulating soliciting? Yes No

If "yes", explain: _____

Has the applicant ever been convicted of the commission of a felony? Yes No

If "yes", explain: _____

Type of Solicitor's License

Daily: _____ Date: _____

Fiscal Year: _____ Dates: From _____, 2012 to April 30, 2013

To be completed by the Village of New Baden

License Date: Term of License: _____

Fee for License: _____

License/Permit No.: _____

\$25.00 per day per person
\$100 per year (May 1 to April 30)