

COMPANY APPLICATION
FOR SOLICITATION PERMIT

Please print or type

CHECK ONE BELOW:

INITIAL APPLICATION _____

SUPPLEMENTAL APPLICATION _____

RENEWAL APPLICATION _____

NAME OF COMPANY _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

FEDERAL TAX IDENTIFICATION NUMBER _____

CONTACT NAME: _____ EMAIL: _____

PHONE NUMBER WITH AREA CODE OF CONTACT IN THE COMPANY: _____

PLEASE SUBMIT THE FOLLOWING DOCUMENTS WITH THIS APPLICATION AND \$50 (cash, cashier's, or company check):

COPY OF VALID BUSINESS TAX LICENSE ISSUED BY DAVIDSON COUNTY CLERK

COPY OF CONTRACT/ORDER FORM USED IN OBTAINING ORDERS OR MAKING SALES

LIST OF MERCHANDISE BEING SOLD AND PRICE LIST OF SAID MERCHANDISE

LIST OF PEOPLE ALLOWED TO SOLICIT ON BEHALF OF THE COMPANY (ON ATTACHMENT)

I hereby declare and certify under penalties of law that the information herein furnished is true and correct. I further agree to furnish any other or additional information as the Metropolitan Clerk may require.

Signature of company representative

Date

Print name and title of company representative

Internal Use Only

Permit No. _____

Date Issued _____

Date Expires _____

Receipt No. _____

