

PEDDLER/SOLICITOR PERMIT APPLICATION

Applicants are highly encouraged to contact Code Enforcement at 614.410.4600 for assistance. Permits are usually approved within 40 working hours after the application is submitted. The approved permit must be displayed at all times.

I. APPLICATION REQUIREMENTS

- ☐ **APPLICATION FEE**
- ☐ **APPLICATION**
- ☐ **SUPPLEMENTAL INFORMATION**
 - ☐ One (1) copy of a background check, completed by a local law enforcement agency (must be current within the calendar year)
 - ☐ One (1) color copy of a recent government issued photo identification
 - ☐ One (1) copy of a State of Ohio transient vendor's license, if applicable

II. APPLICANT INFORMATION

Name of Applicant:			
Local Mailing Address:			
Permanent Mailing Address:			
Daytime Telephone:			
Email or Alternate Contact Information:			
Social Security Number:		Date of Birth:	
Height:	Weight:	Eye Color:	Hair Color:
Vehicle Make:	Vehicle Model:	Year:	Color:
License Number:	State:	Is this vehicle to be used for solicitation? <input type="checkbox"/> Yes <input type="checkbox"/> No	

III. PEDDLER/SOLICITOR INFORMATION

Name of Employer/Firm Soliciting For:	Length of Employment:
Firm's Telephone:	Federal ID Number:
Owner's Name:	Owner's Telephone Number:
Area/Location of Solicitation:	
If on private property, do you have the owner's permission? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Describe the nature of the goods/services to be furnished, or the purpose of solicitation:	



IV. PLEASE ANSWER THE FOLLOWING:

Have you applied for a permit in Dublin before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when?
Are you or your firm licensed in the State of Ohio?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is the license current? <input type="checkbox"/> Yes <input type="checkbox"/> No

V. BACKGROUND INFORMATION: Attach additional sheets if necessary.**Employment During Past Year**

Name/Address:
Name/Address:
Name/Address:

Residences During Past Year:

Address:
Address:
Address:

Record of Any Arrests Other Than Traffic Violations:

Charge:	City/State:
Charge:	City/State:
Charge:	City/State:

VI. APPLICANT'S STATEMENT OF ACKNOWLEDGEMENT

I, _____, hereby state that the information submitted within this application is true and correct. I, furthermore, testify that I will abide by all regulations that govern peddlers and solicitors within the City of Dublin. I also have been informed of and agree to all other conditions that are attached to the approval of my application.	
Original Signature of Applicant:	Date:

FOR CITY USE ONLY

Date Received:	Date Approved:	Amount Received:	Receipt No.:
Approved By:		Date Approved:	
Resubmission? <input type="checkbox"/> Yes <input type="checkbox"/> No		Notes:	
<input type="checkbox"/> Approved <input type="checkbox"/> Approved as Noted <input type="checkbox"/> Disapproved as Noted			

For questions or more information, please contact Planning at 614.410.4600 | www.dublinohioUSA.gov



EVERYTHING GROWS HERE.