

Solicitor Application

The undersigned hereby makes application for a Solicitor Permit in the City of Leavenworth, Kansas under the provisions of the Code of Ordinances,
Chapter 34 Peddlers, Solicitors & Transient Merchants, Article II

BUSINESS INFORMATION Business Name: Kansas Sales Tax I.D. #: Business Address: City: State Zip: Description of the nature of the business and goods to be sold/services to be offered: (provide sample of handout) APPLICANT INFORMATION Applicant Name: Birthdate: Residence Address: City: State Zip: Description of the nature of the business and goods to be sold/services to be offered: (provide sample of handout) APPLICANT INFORMATION Applicant Name: Birthdate: Residence Address: City: State Zip: Applicant Phone: Email: VEHICLE INFORMATION (used for solicitation) Year, Make & Model: Cotor State: Tag #: Office Use Only 1. Have you ever been convicted of any crime involving moral turpitude or any telony convictions, misdemeanor or of violations involving force, threst of lorce, yelence, theft, delinenesty, fraud, sexual misconduct of the city of violation of yall was regulating the act of Peddier/Solicitors within the past five years in this state of any other state or subdivision thereof or of the United States? Yes or No 2. Have you ever haid a peddler or solicitor permit, license or registration revoked or suspended under the ordinance of the City of Leavenworth or any other city? 4. I understand and agree that if a permit is granted, it will not be used or represented in any way as an endorsement by the City or by any department or officer of the City. By signing, if agree to comply with the City of Leavenworth Ordinance, Rules, or Regulations that govern the license and that all information provided is true and correct. I understand that while soliciting I am to wear the city issued badge.			Daily \$50.00 Weekly \$250.00	
Business Name: City: State: Zip:		application at least 2	business days prior to start date	
Business Address: Business Phone: Email: End Date: End Date: Description of the nature of the business and goods to be sold/services to be offered: (provide sample of handout) APPLICANT INFORMATION Applicant Name: Birthdate: Residence Address: City: State: Zip: Applicant Phone: Email: VEHICLE INFORMATION (used for solicitation) Year, Make & Model: Color: State: Tag #: Office Use Only Date Misconduct of the violation of any laws regulating the act of Pedders/Solicitors within the past five years in this state of any other state or subdivision thereof or of the United States? Yes or No 1. Have you ever had a peddler or solicitor permit, license or registration revoked or suspended under the ordinance of the City of Leavenworth or any other city? Yes or No Account Number 4.1 understand and agree that if a permit is granted, it will not be used or represented in any way as an endorsement by the City or by any department or officer of the City. We signing, I agree to comply with the City of Leavenworth Ordinance, Rules, or Regulations that govern the license and	BOSINESS INFORMATION			
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Solicitation Start Date:	Business Address: City: _		State: Zip:	
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Applicant Signature: _____ Date: _____

Fees paid are not prorated, refundable or transferable

Office of the City Clerk • City of Leavenworth • 913-682-9201 • 100 N. 5th Street • Leavenworth, Kansas 66048