

SOLICITATION PERMIT APPLICATION

PERMIT NO. _____

1. NAME _____
2. PERMANENT ADDRESS _____

 LOCAL ADDRESS _____
(if different from above) _____
3. DATE OF BIRTH _____
4. SOCIAL SECURITY NO. _____
5. PHONE NUMBER _____
6. DRIVER LICENSE OR STATE ID NUMBER _____

State
Number
7. MAKE/YEAR OF AUTO _____
 LICENSE NUMBER _____
 STATE IN WHICH VEHICLE LICENSED _____
 VEHICLE IDENTIFICATION NUMBER _____
8. COMPANY NAME _____
 ADDRESS _____

 E-MAIL ADDRESS _____
 PHONE NUMBER _____
 SUPERVISOR'S NAME _____
9. TYPE OF SALES _____

<input type="checkbox"/> DATE APPLICATION SUBMITTED <input type="checkbox"/> DATE APPLICATION APPROVED <input type="checkbox"/> DATE PHOTOS SUBMITTED <input type="checkbox"/> BONDING COMPANY <input type="checkbox"/> EXPIRATION DATE OF BOND <input type="checkbox"/> DATE PERMIT ISSUED	
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NAMES OF ALL OTHER CITIES IN WHICH SOLICITATION HAS BEEN CONDUCTED IN THE LAST 6 MONTHS	
1) _____	6) _____
2) _____	7) _____
3) _____	8) _____
4) _____	9) _____
5) _____	10) _____
PROPOSED DATES AND TIMES OF SOLICITATION	

APPLICANT MUST PROVIDE TWO PHOTOGRAPHS MEASURING 1.5" X 1.5" SHOWING THE HEAD AND SHOULDERS IN A CLEAR AND DISTINGUISHING MANNER. PHOTOGRAPHS MUST HAVE BEEN TAKEN WITHIN THE PRECEDING 60 DAYS BEFORE FILING THE APPLICATION.

APPROXIMATE TIME PERIOD WHICH THE SOLICITATION IS TO BE MADE	
_____ STARTING DATE	_____ ENDING DATE

- WILL PAYMENT FOR GOODS OR SERVICES BE RECEIVED AT TIME OF SOLICITATION? Yes _____ No _____
- WILL A PAYMENT BE DEMANDED, ACCEPTED OR RECEIVED OR A DEPOSIT OF MONEY BE REQUIRED IN ADVANCE OF FINAL DELIVERY? Yes _____ No _____
 - IF YES, WHAT IS THE BASIS OF CALCULATION OF SUCH PAYMENT? _____
- HAVE YOU EVER PLEAD GUILTY, OR NOLO CONTENDER TO, OR HAVE BEEN CONVICTED OF A FELONY OR MISDEMEANOR INVOLVING FRAUD, DECEIT, MISREPRESENTATION, A SEX OFFENSE, TRAFFICKING A CONTROLLED SUBSTANCE, OR ANY ACT OF VIOLENCE AGAINST PERSONS OR PROPERTY? Yes _____ No _____
 - IF YES, GIVE A DESCRIPTION OF EACH SUCH CONVICTION AND/OR PLEA AND THE DATE OF THE OFFENSE. _____

I, THE UNDERSIGNED AGREE THAT ALL SOLICITATION ACTIVITIES CONDUCTED SHALL BE OPERATED IN FULL CONFORMITY OF THE LAWS OF THE STATE OF TEXAS, AND WITH THE APPLICABLE LAWS AND REGULATIONS OF THE CITY OF NORTH RICHLAND HILLS AND ORDINANCE NO. 3077, SOLICITORS AND HANDBILL DISTRIBUTION ORDINANCE, AND THAT ANY VIOLATION OF ANY SUCH LAWS OR REGULATIONS SHALL RENDER THE PERMIT SUBJECT TO SUSPENSION OR REVOCATION. I UNDERSTAND THAT SOLICITATION MAY NOT BE CONDUCTED IN THE CITY OF NORTH RICHLAND HILLS UNTIL SUCH TIME AS A PERMIT IS ISSUED. I FURTHER STATE THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT AND THAT I HAVE NOT FALSIFIED ANY INFORMATION PROVIDED IN OR ATTACHED TO THIS APPLICATION. I HEREBY CONSENT TO A DRIVING RECORD AND CRIMINAL HISTORY BACKGROUND CHECK.

 SIGNATURE OF APPLICANT

____/____/____
 DATE



NOTICE TO APPLICANTS

☐ IF APPLICANT IS AN ENTITY THAT SPONSORS OR EMPLOYS MINORS A SOLICITORS PERMIT WILL BE REQUIRED FOR EACH SUCH MINOR.

☐ IF APPLICANT IS EMPLOYED BY ANOTHER, THE APPLICANT MUST FURNISH THE NAME, PHYSICAL STREET ADDRESS AND TELEPHONE NUMBER OF THE EMPLOYER TOGETHER WITH CREDENTIALS IN WRITTEN FORM ESTABLISHING THE AUTHORITY OF THE EMPLOYEE TO ACT FOR THE EMPLOYER.

☐ IF THE APPLICANT IS ACTING AS AN AGENT, THE APPLICANT MUST FURNISH THE NAME, PHYSICAL STREET ADDRESS AND TELEPHONE NUMBER OF THE PRINCIPAL BEING REPRESENTED WITH CREDENTIALS IN WRITTENFORM ESTABLISHING THE RELATIONSHIP AND AUTHORITY OF THE AGENT TO ACT FOR THE PRINCIPAL.

☐ APPLICANT MUST FURNISH PROOF OF POSSESSION OF ANY LICENSE OR PERMIT WHICH, UNDER FEDERAL, STATE OR LOCAL LAWS OR REGULATIONS, THE PERSON IS REQUIRED TO HAVE IN ORDER TO CONDUCT THE PROPOSED SOLICITATION. COPIES OF ALL SUCH LICENSES AND PERMITS SHALL BE ATTACHED TO THE APPLICATION.

City Secretary
City of North Richland Hills



Applicant Notification / Release of Information

In connection with my application for employment, I understand that investigative inquiries on my background, in accordance with the Fair Credit Reporting Act and all state and federal laws, are to be made on me, including information as to my personal character, abilities, work habits, mode of living, residency, general reputation, performance, experience, and other qualities pertinent to my qualifications for employment, including reasons for termination of past employment.

I understand that prospective employer and/or First Check may make inquiries but not limited to my consumer credit history, education, professional licensing, and criminal history and driving history. Furthermore, I understand that prospective employer and/or First Check may request information from various federal, state and other agencies that maintain records concerning my past driving history, credit history, criminal history, military history, civil and other experiences.

I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my perspective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an investigative consumer report was requested and will be given full information as to the nature and the scope of the investigation as well as the name of the reporting agency or sources of information.

I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by prospective employer and/or First Check to furnish any or all of the above mentioned information. In addition, I hereby release First Check and prospective employer from any and all liability for damages arising from the investigation and disclosure of the employees and other persons, who, in good faith provide to prospective employer and/or First Check the above mentioned information as requested, in order to successfully complete a background investigation for my application of employment. I will allow a photocopy of this authorization to be as valid as the original.

Print Full Name: _____

Social Security: _____ *Date of Birth _____ / _____ / _____

Current Address: _____

City/State/Zip _____

Drivers License # _____ State _____

Prospective Employer City of North Richland Hills, Texas

Applicant's Signature: _____

*Date of birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purposes.

Please list all misdemeanor and felony criminal matters, other than minor traffic safety violations for which no arrest was made, in which you were convicted, served probation, participated in deferred adjudication or other program to avoid a conviction, or made restitution or participated in pre-trial diversion or other program to avoid prosecution.
