

**VILLAGE OF MATTESON
APPLICATION FOR SOLICITOR'S PERMIT**

Instructions for completing the Application for Solicitor's Permit

When applying for a solicitor's permit it is very important that the application be filled out completely and accurately to avoid any delays in processing. Failure to submit all requested documentation will delay the application process.

PLEASE NOTE: It will take a minimum of ten (10) business days to process an application to solicit in the Village of Matteson.

There is a \$10.00 fee per person due at the time permits are issued, and each such certificate of registration shall expire on April 30 after its issuance.

When requesting approval to Solicit on a Street Corner or in an Intersection:

The provisions of the Illinois Compiled Statutes Chapter 625, Section 5/11-1006 must be complied with:

- 1) The soliciting organization must be registered with the Attorney General of the State of Illinois as a charitable organization involved in the solicitation and collection of funds for charitable purposes and a copy of this certificate must accompany your application.
- 2) Be engaged in a Statewide fund-raising activity and provide the Village with written proof thereof, and
- 3) The soliciting organization must provide the Village of Matteson with evidence of insurance indemnifying solicitors for any injuries to any person or property during the solicitation which is casually related to an act of ordinary negligence of the soliciting agent.
- 4) All individuals must be 16 years of age or older.
- 5) Bright reflective vests must be always worn by all solicitors.

When requesting approval to solicit door-to-door:

Submit solicitor's application only. Payment will be due upon approval.

VILLAGE OF MATTESON
4900 Village Commons Matteson, IL 60443
(708) 283-4900 Fax # (708) 748-5196

APPLICATION FOR SOLICITOR'S PERMIT

Date: _____

Is this application for Street Corner or Door to Door? _____

1. Subject matter to be distributed, or purpose of solicitation:

If street corner solicitation, which street corners: _____

2. Date such Solicitation will be conducted in Matteson: _____

Time such Solicitation will be conducted in Matteson: _____

3. Applicant Information:

Name Birth Date

Address City State Zip Code

Length of Residency at above address (_____) Telephone Number

Driver's License Number or State ID State Issued

Email Address

4. Physical Description of Applicant:

_____	_____	_____ Ft. _____ Inches
Age	Sex	Height
_____	_____	_____
Color of Hair	Color of Eyes	Complexion

Distinguishing Marks or Scars (if any)

5. Name of Company, Corporation, or Association represented by applicant:

Name _____ (_____) _____

Address _____ Telephone Number _____

City _____ State _____ Zip _____

Headquarters _____

Length of time employed or representing company: _____

Is company a tax exempt or non-profit company? _____

(You must be registered with the Attorney General of the State of Illinois and provide the Village with a copy of your certificate as verification of tax-exempt status.) Rev. 7/9/98

6. Retailer's Occupation Tax Number: _____

7. Name and address of person who will oversee conducting the solicitation in Matteson:

Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Driver's License or State ID _____ State Issued _____

Cell Phone _____

8. Name and address of all persons who will be soliciting in the Village of Matteson under this permit, if granted (attach additional pages, if necessary):

a) _____
Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Driver's License or State ID _____ State Issued _____

b) _____
Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Driver's License or State ID _____ State Issued _____

c) _____
Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Driver's License or State ID _____ State Issued _____

d) _____
Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Driver's License or State ID _____ State Issued _____

e) _____
Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Driver's License or State ID _____ State Issued _____

