

Village of Lockland, Ohio
Application for Commercial Solicitation



This application is for both commercial solicitation and charitable, religious and/or political solicitation, including door-to-door solicitation and the distribution of documents, without permission to do so, on either private or property or residences. Commercial solicitation is not permitted on public property and/or the public right-of-way. All regulations with regard to commercial solicitation can be found in the Lockland Code of Ordinances, Chapter 844.

APPLICATION FEE: \$150.00 made Payable to The Village of Lockland

This fee is due at the time of submittal of the application. It shall be paid to the Village Administrative Office and will be used to cover the cost of investigation of the facts stated within the application.

1. Name, address, and telephone number of the organization/company

Organization: _____ Phone Number: _____
City: _____ State: _____ Zip: _____

2. Name and address of person directly in charge of solicitation:

Last Name: _____ First Name: _____ Middle Initial: _____
Permanent Address: _____ Apt. _____
City: _____ State: _____ Zip: _____
Home Phone Number: _____ Mobile Phone Number: _____
Date of Birth (month/day/year): _____

Current address, if different from present address: _____
City: _____ State: _____ Zip: _____

Employer Name: _____ Position: _____
Employer Address: _____
City: _____ State: _____ Zip: _____
Phone Number: _____ Fax Number: _____
Name of Supervisor: _____

Have you ever been convicted of any crime, misdemeanor, or violation of any municipal ordinance?

Yes _____ No _____ If "Yes", please explain the nature of the offense and penalty received:

3. **Specific Area(s) where solicitation will take place in the Village of Lockland:**

4. **Specific Description of the nature of the business and goods to be sold, including the proposed method of delivery:** _____

5. **Number of agents and employees to be engaged in solicitation:** _____

6. **Please indicate expected days of solicitation:** _____ to _____

Commercial Solicitation shall not exceed 90 days; however, the Village of Lockland reserves the right to limit that solicitation period.

7. **Please name any other community in which this organization has solicited in the past 3 years:**

8. **Please list each solicitor to be included in this license individually on page 3.**

9. **If goods are to be sold, please include the location of the goods to be produced or manufactured at the time this application is submitted:**

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

10. **Please provide a photograph of the applicant, which has been taken within 60 days immediately prior to the date of the application.** This picture shall be two inches by two inches, showing the head and should of the applicant in a clear distinguishing manner.

11. **Please be prepared to provide a state-issued identification to the Village Administrative Office when submitting this application.** A representative of the Village accepting the application will obtain a copy of this identification for inclusion as part of the application.

12. **Please Note: If applicant is not a resident of the Village, or is a resident who is representing an organization whose principal place of business is outside the State of Ohio, a surety bond in the amount of \$1000 must be accepted and approved by the Mayor or his or her designee before the Village will issue an approved commercial solicitation license to the applicant.**

All of the above statements are true to the best of my knowledge, information and belief. All questions have been answered, and if any change in fact, policy or method occurs after the date of this application, or the issuance of a permit, the applicant will notify the Village Administrative Office in writing within 24 hours of this change:

Signed: _____

FOR OFFICE USE ONLY

Date Received: _____

Date Approved: _____

Chief of Police Endorsement : _____

Date: _____

Approved by: _____

Fee paid: _____

Date surety bond submitted, if applicable: _____



Door-to-Door Solicitation Permit Roster

Name:	D.O.B.:	Address:
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

PLEASE ATTACH ADDITIONAL COPIES OF THIS SHEET IF NECESSARY

Group Leader: _____ Phone Number: _____

Organization: _____ Date: _____