VILLAGE OF AVISTON

APPLICATION FOR CERTIFICATION OF REGISTRATION – SOLICITOR/PEDDLER

CERTIFICATE FEE - \$150/5 consecutive business days BACKGROUND CHECK FEE - \$100.00			Date Issued Expires 5pm		
Name					
NameFirst	Middle	Last			
DOB	Solicitor phone #				
AddressStreet					
Street	City	State	Zip		
Length at above address					
Address of place or residence during the la	ast three year is ot	her than present:			
Age Married Single I			ther:		
Physical Description: Hair Eyes	Weight	_ Height Social S	Security #		
Driver's License Number and State		Make & Model of	Vehicle/ Plate Number		
Business Name	Bus	iness Phone #			
Business Address		ngth of Employment			
Nature of Product and/or Service					
Copy of \$1000.00 Bond must presented w	ith this application	ı.			
Dates requested for Certificate					
Have you applied for a Certificate from the			No		
Have you ever been convicted of a Violation Code of Ordinances of the Village of Avist	on of the provision	ns of the Soliciting Chap			

nowledge and ordinances, Vill		iles and regulation as st I I do further understan		f
SIGNATURE	,	DATE	_	
			CKGROUND CHECK CLEA DATE	
			PYMT CERTIFICATE P	PYMT

AVISTON POLICE DEPARTMENT

149 S Page Street / P O Box 401 Aviston IL 62216 (618) 228/9044

Authorization for Release of Information

The undersigned authorizes a review of and full disclosure of all records concerning myself to any agent of the Aviston Police Department, whether the records are of a public, criminal, internal, or confidential nature. I direct the release of such information regardless of any arrangement I may have made to the contrary with any entity or individual to whom this release is presented.

The intent of this authorization is to give my consent for full and complete disclosure of criminal records, internal investigation records, military records, records of educational and financial institutions, including academic records, records of loans and other financial statements and records where filed; records maintained by the National Personnel Records Center, and the United States Veterans Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints, or grievances, filed by or against me. I specifically waive my right to written notices of release of information relating to prior disciplinary actions, as provided by the Illinois Personnel Records Review Act. I also waive my right to inspect and copy any records provided in response to this authorization.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, because of this authorization, will be considered in determining my suitability for a solicitors permit by the Aviston Police Department and the Village of Aviston. Additionally, I understand the duty of the Aviston Police Department to release any information of a serious criminal nature uncovered by the investigation to the proper authorities and to make other reports of a serious criminal nature uncovered by the investigation to the proper authorities and to make other reports as may be mandated by law. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release such person(s) from any and all liability, which may be incurred as a result of furnishing such information whether from record or recollection. I further release the Aviston Police Department, the Village of Aviston and its agents and designees under this release, from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain and original writing of my signature.

I have read and fully understand the contents of this "Authorization for Release of Personal Information".

Notary Signature Printed

Seal:

PLEASE TYPE OR PRINT

Last Name First Middle Maiden Name

Address Street Name City State Zip

State ID or Driver's License Number

DOB

Village of Aviston

SOLICITOR PERMIT REQUIREMENTS

ALL ITEMS MUST BE SUBMITTED FOR EACH APPLICANT

- 1. Completed Solicitor Application Form
- 2. Signed permission form for background investigation
- 3. Payment of \$100.00 in the form of cash, cashier's check, or money order for background check (payment is non-refundable)
- 4. Copy of \$1000.00 bond
- 5. Copy of a valid Driver's license or State ID
- 6. Two 2x2 color photographs taken within the last 60 days

ALLOW 2-3 WEEKS FOR RESULTS OF BACKGROUND CHECK. WE WILL CONTACT YOU IF THE CERTIFICATE IS APPROVE AND READY. PAYMENT OF \$150 (CASH, CASHIER'S CHECK OR MONEY ORDER) CERTIFICATE FEE (NON-REFUNDABLE) MUST BE MADE WHEN THE CERTIFICATE IS PICKED UP.