

# CLEARWATER POLICE DEPARTMENT STREET SOLICITATION APPLICATION

**645 Pierce Street Clearwater, FL 33756 Phone: 727- 562-4152, Fax: 562-4466**

Please Print

Permit Number \_\_\_\_\_ District \_\_\_\_\_ Date \_\_\_\_\_

NAME OF APPLICANT (Business/ Organization/Individual)	DESIGNATED REPRESENTATIVE	PHONE (DAY)	FAX NUMBER
AFTER HOURS CONTACT PERSON AND NUMBER		PAGER NUMBER OR CELLULAR TELEPHONE NUMBER	
ADDRESS OF EVENT OR INTERSECTION		ALTERNATE ADDRESS OR INTERSECTION	
PERMIT SERVICE DATE(S), DAYS AND HOURS OF SOLICITATION		NUMBER OF SOLICITORS _____	E-MAIL ADDRESS
*DESCRIPTION OF SOLICITATION/ORGANIZATION RECEIVING FUNDS	LIABILITY INSURANCE <input type="checkbox"/> Yes <input type="checkbox"/> No Insurance Company Name _____ POLICY # _____		

The organization or person acting on behalf of the organization must provide the following to the Chief of Police for approval of this permit:

- 1) No fewer than 14 calendar days prior to the proposed solicitation the name and address of the person or organization that will perform the solicitation and the name and address of the organization that will receive funds from the solicitation.
- 2) Specific details of the location or locations of the proposed solicitation and the hours during which the solicitation activities will occur.
- 3) Proof of commercial general liability insurance against claims for bodily injury and property damage occurring on streets, roads, or rights-of-way or arising from the solicitor's activities or use of the streets, roads, or rights-of-way by the solicitor or the solicitor's agents, contractors, or employees. The insurance shall have a limit of not less than \$1 million per occurrence for the general aggregate. The certificate of insurance shall name the City of Clearwater as an additional insured and shall be filed with the Office of the Chief of Police no fewer than 14 days prior to the date of the solicitation.
- 4) The police department shall waive the insurance requirement in paragraph (3) if the applicant is unable to obtain an insurance company that will provide the applicant an insurance policy or if the applicant's income is equal to or below 200 percent of the then-current federal poverty guidelines prescribed for the size of the household of the applicant by the United States Department of Health and Human Services or if the person is receiving Temporary Assistance for Needy Families-Cash Assistance, poverty-related veterans' benefits, or Supplemental Security Income (SSI). The 2009/2010 federal poverty guidelines are currently as indicated in Table 1:

Table 1 - Federal Poverty Guidelines	
Person in Family	Poverty guideline
1	\$10,830 (200 percent is \$21,660)
2	14,570 (200 percent is \$29,140)
3	18,310 (200 percent is \$36,620)
4	22,050 (200 percent is \$44,100)
5	25,790 (200 percent is \$51,580)
6	29,530 (200 percent is \$59,060)
7	33,270 (200 percent is \$66,540)
8	37,010 (200 percent is \$74,020)
For families with more than 8 persons, add \$3,740 (200 percent is \$7,480) for each additional person.	

Violations of the following could result in the issuance of a Notice To Appear in court:

- 1) Organizations or persons meeting the requirements may solicit for a period not to exceed 10 cumulative days within one calendar year.

- 2) All solicitations shall occur during daylight hours only.
- 3) Solicitation activities shall not interfere with the safe and efficient movement of traffic and shall not cause danger to the participants or the public.
- 4) No person engaging in solicitation activities shall persist after solicitation has been denied, act in a demanding or harassing manner or use any sound or voice amplifying apparatus or device.
- 5) All persons participating in the solicitation shall be at least 18 years of age.
- 6) Signage providing notice of the solicitation shall be posted at least 500 feet before the site of the solicitation.

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I \_\_\_\_\_, AS AUTHORIZED REPRESENTATIVE OF AFOREMENTIONED PERMITTEE, HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS PERMIT APPLICATION, AND THE "CONDITIONS OF PERMIT," AND FURTHER AGREE THAT I WILL ABIDE BY AND BE SUBJECT TO THESE CONDITIONS IN ALL RESPECTS.

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SIGNATURE OF PERMITTEE OR AUTHORIZED REPRESENTATIVE

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DATE

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**OFFICE USE ONLY**

☐ **GRANTED** THE ABOVE APPLICATION FOR PERMIT IS HEREBY GRANTED, AND THE ABOVE APPLICATION, TOGETHER WITH THE AFOREMENTIONED "CONDITIONS OF PERMIT" ARE HEREBY ADOPTED, BY REFERENCE, AND ARE MADE A PART OF AND CONSTITUTE THE TERMS AND CONDITIONS AND THIS PERMIT.

☐ **DENIED** THE ABOVE APPLICATION FOR PERMIT IS HEREBY DENIED: \_\_\_\_\_

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AUTHORIZED SIGNATURE

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DATE

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\*Additional Information:

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