

Denton Police Department
Individual Application for Solicitors or Itinerant Merchants Permit
City of Denton, Texas

Date of Application _____ Permit Number _____ PD-_____

Name of Applicant _____

Date of Birth _____ Race _____ Sex _____ SS # _____

Age _____ Height _____ Weight _____ Hair _____ Eyes _____

Drivers License Number _____ State _____

Address while in Denton _____ Phone _____

Home Address _____ Phone _____

Name of Company/Corporation represented _____ Phone _____

Address of Company/Corporation _____

Description of goods/services sold, solicited or displayed _____

Location where sales will occur _____

Vehicle Information:

Year _____ Make _____ Model _____ Color _____

License Number _____ State of Registration _____

This permit is requested for the dates of _____, until _____

List all communities in which you have solicited within the past twelve (12) months and what company represented.

List all arrests within the past twelve (12) months, the date of arrest, the location of the arrest and the disposition of the arrest.

**This application must be accompanied by the \$20.00 permit fee. The fee must be in cash and in the correct amount.

I, the undersigned, affirm that the information contained in this application is true and correct. I acknowledge that I have received a copy of the Solicitors and Itinerant Merchants Permit Information and Requirements.

Full Name of Applicant _____

Date _____

THIS FORM IS NOT TO BE USED AS A CONSENT/AUTHORIZATION FORM.

Agency to retain this CCH Verification Form for DPS auditing purposes.

DPS Computerized Criminal History (CCH) Verification Form

Section 1: Applicant must acknowledge the information in Section 1. Signature & date required.

Applicant Name (Print):

I acknowledge that a Computerized Criminal History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411, Subchapter F <https://statutes.capitol.texas.gov/>.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is **not** allowed to discuss with me any CHRI obtained using the name and DOB method.

Optional Only: If the agency directly requests that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search, I can make an appointment with the Fingerprint Applicant Services of Texas (FAST) by visiting the [Crime Records General Information | DPS \(texas.gov\)](#) Review of Personal Criminal History or call the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company. Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

Applicant Signature:

Date:

Sign and date to acknowledge the statement above.

Section 2: Agency use only. Must be completed by authorized personnel conducting search.

Agency Name:

Authorized Searcher:

Signature of Authorized Searcher:

Date of Search:

Section 3: Agency use only. Name Based CHRI /CCH Tracking information. Check all that apply.

Purpose for CHRI Search.	<input type="checkbox"/> Applicant <input type="checkbox"/> Volunteer <input type="checkbox"/> Contractor <input type="checkbox"/> Other:
Is any part of CHRI stored by agency?	Reminder: DPS does not recommend storing any part of CHRI. <input type="checkbox"/> NO, CHRI is not stored by agency. <input type="checkbox"/> YES, CHRI is stored by agency.
CHRI Retention Period	<input type="checkbox"/> Temporarily Only <input type="checkbox"/> Annual <input type="checkbox"/> None Stored/Saved <input type="checkbox"/> Other:
CHRI Storage Method	<input type="checkbox"/> Physical/Printed (paper copy) <input type="checkbox"/> Digital/Electronic (on device/computer)
CHRI Retention Purpose	Explain: Reminder: CHRI must be destroyed after authorized purpose has ended.
Date CHRI Destroyed	
Destruction Method	Explain:

[CHRI + Audit Resources \(CJIS Launch Pad\) link](#)