



CITY OF DALLAS



# CITY OF DALLAS

# Solicitor and Handbill Distribution Application

(Permit Fee \$50.00; non-refundable)

**APPLICATION IS HEREBY MADE FOR A SOLICITOR'S PERMIT TO DISTRIBUTE HANDBILLS OR TO SELL PRODUCTS/SERVICES IN DALLAS, TEXAS. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

**APPLICATION IS MADE ON BEHALF OF: (CHECK ONE)**

**SELF**       **PARTNERSHIP**       **CORPORATION**       **ASSOCIATION**

**TYPE OF PERMIT:**

- DOOR TO DOOR SOLICITATIONS
  - STATIONARY
  - HANDBILLS
  - NON-RESIDENTIAL

**LOCATION:**

**TYPE OF GOODS/PRODUCTS/SERVICES YOU DESIRE TO SELL:**

## **DATES SOLICITORS/PEDDLERS WILL BE IN THE CITY: FROM**

TO

## **BUSINESS OR COMPANY INFORMATION:**

**NAME OF COMPANY:**

**NAME OF PERSON IN CHARGE OF THE SOLICITATION:**

**PERMANENT BUSINESS ADDRESS:**

**CITY:**

**STATE:**

**ZIP CODE:**

**TELEPHONE #:**

(A POST OFFICE BOX IS NOT ACCEPTABLE FOR ANY REQUIRED ADDRESS)

**LIST EACH COMPANY OFFICER**

<b>Name</b>	<b>Address</b>	<b>Phone Number</b>	<b>Title</b>
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**DATE AND PLACE OF INCORPORATION OR ESTABLISHMENT OF BUSINESS**

**LIST EACH PERSON WHO WILL BE CONDUCTING A HOME SOLICITATION FOR THE APPLICANT**

<b>Name</b>	<b>Address</b>	<b>Phone Number</b>
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**APPLICANT INFORMATION**

**(INDIVIDUAL): DATE OF APPLICATION:**

**APPLICANT NAME:**

**LOCAL ADDRESS:**

**CITY:**

**STATE:**

**ZIP CODE:**

**LOCAL TELEPHONE #:**

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**PERMANENT ADDRESS:**

CITY:                    STATE:                    ZIP CODE:                    TELEPHONE #:

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**BUSINESS OR INDIVIDUAL FOR WHICH APPLICANT WILL BE WORKING AS AN AGENT**

NAME:                    ADDRESS:

CITY:                    STATE:                    ZIP CODE:                    TELEPHONE #:

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**DRIVERS LICENSE #/STATE ISSUED:**

**DATE OF BIRTH (MM/DD/YEAR):**

**EMERGENCY CONTACT (NAME & TELEPHONE #):**

**EMAIL ADDRESS:**

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**PLEASE LIST ALL COMMUNITIES WHERE APPLICANT HAS WORKED AS A HOME SOLICITOR**

**IN THE PAST 12 MONTHS:**

**IF THE APPLICANT WAS AN AGENT OF DIFFERENT COMPANIES IN THE OTHER COMMUNITIES,**

**LIST THE NAMES OF THOSE COMPANIES:**

**PLEASE LIST THE NATURE, CHARACTER, AND QUALITY OF GOODS OR SERVICES TO BE ADVERTISED,**

**OFFERED FOR SALE, OR DELIVERED AS PART OF THE HOME SOLICITATION:**

**WILL THE APPLICANT REQUIRE PAYMENT OR DEPOSIT OF MONEY IN ADVANCE OF THE FINAL**

**DELIVERY OF THE GOODS OR SERVICES?       NO     YES,**

**LIST THE DATES, TIMES, AND LOCATIONS FOR WHICH THE APPLICANT PROPOSES TO CONDUCT**

**HOME SOLICITATIONS IN THE CITY:**

**PLEASE OUTLINE THE METHOD OR METHODS TO BE USED IN CONDUCTING HOME SOLICITATIONS:**

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**HAVE YOU EVER BEEN CONVICTED OF A CRIME LISTED IN SECTION 42- 9(a)(2), AS SET FORTH IN THIS  
ORDINANCE?       NO     YES, If yes complete the information below:**

**CHARGES CONVICTED OF      DATE OF CONVICTION      LOCATION (CITY AND STATE)**

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**VEHICLE INFORMATION (Vehicle being used during Door-to-Door Activities):**

**MAKE:      MODEL:      YEAR:      LICENSE PLATE #:      STATE:**

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**EACH APPLICANT MUST APPEAR IN PERSON AND PROVIDE PROOF OF IDENTIFICATION THROUGH SUBMISSION OF A VALID DRIVER'S LICENSE OR OTHER VALID, OFFICIAL PHOTO IDENTIFICATION DEEMED ACCEPTABLE BY THE DALLAS POLICE DEPARTMENT (DPD). APPLICANT MUST ALSO PROVIDE PROOF THAT THEY POSSESS ALL LICENSES OR PERMITS REQUIRED BY THIS CODE, STATE OR FEDERAL LAW FOR THE OPERATION OF THE PROPOSED BUSINESS. FURTHER, IF APPLICANT IS AN AGENT OF AN INDIVIDUAL OR COMPANY, WRITTEN PROOF OF THE APPLICANT'S AUTHORITY TO REPRESENT THE INDIVIDUAL OR COMPANY. AFTER REVIEW OF THE APPLICATION AND CRIMINAL HISTORY INVESTIGATION, THE DPD SHALL APPROVE THE APPLICATION AND ISSUE THE PERMIT UNLESS (1) THE APPLICATION FAILS TO COMPLY WITH CITY ORDINANCE # ; (2) A PREVIOUS PERMIT ISSUED UNDER THIS ORDINANCE WAS REVOKED WITHIN THE PAST 12 MONTHS; (3) THE DPD DETERMINES THE APPLICANT HAS BEEN CONVICTED OF A FELONY OR MISDEMEANOR OFFENSE INVOLVING MORAL TURPITUDE; (4) THE DPD HAS DETERMINED THE APPLICANT HAS FURNISHED FALSE INFORMATION OR IDENTIFICATION; (5) THE APPLICANT HAS A WARRANT OUT FOR HIS/HER ARREST; (6) OR A COURT OF LAW HAS ISSUED AN EMERGENCY PROTECTIVE ORDER AGAINST THE APPLICANT.**

I SWEAR OF AFFIRM THAT I HAVE CAREFULLY READ THE APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE. I UNDERSTAND THAT FAILURE TO PROVIDE ALL INFORMATION REQUESTED OR PROVIDING FALSE INFORMATION IS GROUNDS FOR DENIAL OR REVOCATION OF THE PERMIT. I HAVE READ AND AGREE TO COMPLY WITH CITY ORDINANCE # . IF A PERMIT IS GRANTED IT WILL NOT BE USED AS, OR REPRESENTED TO BE, AN ENDORSEMENT BY THE CITY DALLAS OR ANY OF ITS OFFICERS OR EMPLOYEES.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_