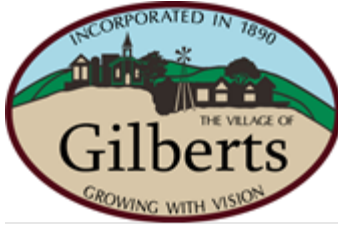


FOR OFFICE USE ONLY

Date Paid: _____

Date Approved: _____



VILLAGE OF GILBERTS
Courtney Baker, Village Clerk
87 Galligan Road
Gilberts, Illinois 60136
(847) 428-2861 Fax (847) 428-2955
cbaker@villageofgilberts.com

APPLICATION FOR SOLICITOR PERMIT

Complete application for each solicitor.

1. Name (first, middle, last): _____
Address (residence): _____
Telephone Number: _____

2. Emergency contact information during the permitted hours of solicitation of the company or organization on whose behalf the company's representative is soliciting:
Name (first, middle, last): _____
Address (residence): _____
Telephone Number: _____

3. Date of Birth (Mo, Day, Year): _____
 Valid Driver's License Number: _____ Issued by (State): _____
 State Identification Card Number: _____ Issued by (State): _____

4. Business Name: _____
Business Address: _____
Business Telephone Number: _____

5. **FOR PROFIT:** Describe the nature of the solicitation, type of business, and attach copies of any print material to be used during the solicitation process – **OR** –
 NOT-FOR-PROFIT: Attach a copy of not-for-profit status. Describe the nature of the solicitation, type of business, or attached handouts that may assist in the review of this application.

6. Has a Certificate of Registration issued to you under the Village of Gilberts' Ordinance been revoked?
 Yes No

7. Have you ever been convicted of a violation of this Ordinance of the Ordinance of any other municipality regulating soliciting? Yes No

8. Have you ever been convicted of the commission of a felony under the laws of the State of Illinois, or any other State or Federal law of the United States? Yes No
9. **FOR PROFIT:** The information I have provided in this Application concerning my background is true and correct. I understand that each participant in this solicitation must submit to fingerprinting and/or background check all applications shall be acted upon by the Village President and/or his or hers designee within seven (7) days after receipt of a completed application and a successfully completed background check.

NOT-FOR-PROFIT: I attest and/or certify that the _____
 (name of the organization) is Not-for-Profit under the terms of the Village of Gilberts ' Solicitors Ordinance, Title 3 and that the organization is in compliance with the Solicitation for Charity Act, 2251LCS 460/0.1 et seq. Solicitors may be required to be fingerprinted, see "For Profit".

ALL: I further understand that without a certificate of registration approved by the Village President and/or his or her designee or a violation of any prevision of Village Code Title 3 shall result in a petty offense, punishable by a fine of not less than seventy five dollars (\$75.00) and of not more than seven hundred fifty dollars (\$750.00), and a separate offense shall be deemed committed on each day during or on which a violation occurs or continues. **If a "No Soliciting" sign is posted at the residence, solicitation is prohibited, and the solicitor will depart peacefully and immediately. Solicitation may only take place between the hours of 9:00 a.m. - 7:00 p.m.** I understand the Village President or his or her designee pursuant to section 3-5-6 of the Village of Gilberts' Village Code may revoke this Certificate. Each person who will be soliciting shall carry on his or her person a Certificate issued to that person by the Village of Gilberts.

Signed this _____ day of _____, 20____

 Applicant's Signature

 Name of Organization

 Village of Gilberts, Village President or Designee Signature

BACKGROUND CHECK		
Background Check Date	Performed By	Fee Paid

Applicant's physical description (for fingerprint processing and/or identification process)
 HT _____ EYES _____ SEX _____ SKIN _____ WT _____ RACE _____ COUNTRY OF BIRTH _____