



**STEPHENS COUNTY
DOOR TO DOOR PEDDLER'S & SOLICITORS
LICENSE APPLICATION**

1. APPLICANT: License Holder's Name (NO initials, spell out all names)

Home address _____

County _____ City _____ State _____ Zip _____

Phone _____ Age _____ Race _____ Sex _____

Date of Birth _____ SS# _____

2. THIS LICENSE IS FOR THE USE OF:

NAME (Owner of Business) _____

Address _____ County _____

City _____ State _____ Zip _____ Phone _____

Age _____ Race _____ Sex _____ Date of Birth _____ SS# _____

3. TRADE NAME OF BUSINESS _____

Business Location _____

Business Phone _____ GA Sales Tax # _____ F E I # _____

Mailing Address _____

(If different from business location)

4. Has any person with an interest in this application ever made an application at any previous time?

YES _____ NO _____ (If yes, give disposition of that application)

5. Has the applicant or anyone connected therewith been cited or charged at any time with any violation of State or Federal law or regulation or any rule or regulation of the City or County?

YES _____ NO _____ (If yes, give details on separate sheet.)

Has any previous license issued to applicant or any person with any interest in the application been revoked by any state or subdivision of the Federal government and reason?

6. PREVIOUS EMPLOYMENT (Start with present or latest employer)

(a) Employer _____ Address _____

Job Description _____

From _____ To _____

(b) Employer _____ Address _____

Job Description _____

From _____ To _____

(c) Employer _____ Address _____

Job Description _____

From _____ To _____

7. Previous Addresses (other than present)

(a) _____ Co _____

(b) _____ Co _____

(c) _____ Co _____

OATH: I (WE) do solemnly swear, Subject to criminal penalties for false swearing, the statements, and answers made to the foregoing questions in this application for a license as a Door to Door Peddler or Solicitor are true and complete, and no false or fraudulent statement or answer is made herein to procure granting of a license, that any license issued pursuant to this application is conditioned upon the truth of the answers and statements made herein and that any false or fraudulent statement or answer herein shall constitute the cause for the suspension or revocation of any license issued pursuant to this application. **Should any change occur during the year for which a license is issued pursuant to this application which would require a different answer to any question contained in this application, such change MUST be reported as a written amendment to this application within five (5) days of the change.** The failure to make such amendment shall be a cause for the suspension or revocation of any license issued. I (WE) have received a copy of the local Door to Door Peddler's and Solicitors ordinance and shall be upheld at all times.

Signature of Applicant Under Oath

Doing Business As

Title

Sworn to and Subscribed before

me this ____ Day of _____ 20_____.

Notary Public