## BRIDGEVIEW POLICE DEPARTMENT SOLICITOR'S PERMIT APPLICATION

NAME OF APPLICAN	l		
	Last	First	Middle
ADDRESS			
CITY	STAT		IP
PHONE NO		L.#	STATE
ADDRESS IF OTHER			
LENGTH OF RESIDEN	ICE	_ LIST BELOW PI 3 YEARS	LACES IF LESS THAN
HEIGHT	WEIGHT	HAIR	EYES
COMPLEXION		TE OF BIRTH	
COMPANY REPRESE	VTING	ADDRE	SS
CITY		ZIP	PHONE
POSITION		TE EMPLOYED	
NAME OF SUPERVISO			
PRODUCT OR SERVICE			
DESCRIPTION OF PRO	DUCT OR SE	ERVICE YOU ARE SI	ELLING IN DETAIL
UAC A CEDITIFICATE	OF DECIGED	ATION FUED DEFINI	
DAS A CEKTIFICATE	OF REGISTRA	ATION EVER BEEN	DENIED OR REVOKED
Y N HAVE YOUE	AINI OIHEK I	MUNICIPALITY TO	YOUR KNOWLEDGE?
SIONS OF ANOTHER I WHERE	VIUNICIPALII		
HAVE YOU EVER BEE	N CONVICTE	DATI	Y N
WHERE	AN CONVICTE	DAT	
	N CONVICTE		NOR OTHER THAN A
TRAFFIC OFFENSE?			NOR OTHER THAN A
NAME AND ADDRESS		ERS IN THE PAST 3	YEARS
l,	, A	M FULLY AWARE	THAT THE VILLAGE OF
BRIDGEVIEW HAS AN	OKDINANCI	E #08-01 PERTAININ	G TO THE
REGISTRATION OF SC	DLICITORS, TI	HAT I HAVE BEEN A	ADVISED THE SAID
UKDINANCE IS ON HA	ND FOR MY	PERSONAL INSPEC	TION IN THE VILLAGE
HALL, THAT I AM FAI	AILIAK WITH	ITIS CONTENTS AN	D WILL ABIDE BY IT
IN ALL KESPECTS. A	LSU, THAT A	LL ANSWERS TO T	HE QUESTIONS ABOVE
OR IN CONNECTION 1			
DATE	SIGNATUR	Œ	
APPLICATION APPRO			DATE
APPLICATION DENIEL			_ DATE
REASON FOR DENIAL	OR REVOCA	TION	