

CITY OF LANCASTER

Solicitor Peddler Street Peddler

Application/Registration

Date Received: _____

Application No. _____

1. INSTRUCTIONS

The City of Lancaster requires an approved application **prior to ANY solicitations or sales**. Applications will not be considered unless they are complete and submitted simultaneously with the necessary fees and supporting documents. Submitting an application **does not** guarantee you or your organization will be approved to solicit or sell.

2. APPLICANT INFORMATION

a) For Individual Applicants:

Applicant Name: _____ Title: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ E-Mail: _____

Physical Description: Height _____ Weight _____ Hair _____ Eyes _____

SSN: _____ - _____ - _____ DOB: ____/____/____ License State & No. ____/____

Name of Employer: _____ E-Mail: _____

Employer Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

b) For Organizations/Group Registration (For Charitable or Religious Purposes Only):

Organization Name: _____ E-Mail: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____

Applicant Name: _____ Title: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ E-Mail: _____

3. BUSINESS/CHARITABLE/RELIGIOUS OPERATIONS

Desired Dates of Operation: ____/____/____ through ____/____/____ Hours: _____ (am/pm) TO _____ (am/pm)

Describe the Nature of Operation: (Ex. Door to Door sales) _____

Vehicle(s) Used as a Part of Operation: YES NO

If Yes, Make: _____ Model: _____ Year: _____ Plate No. _____

(Attach additional sheets with vehicle information if necessary)

Sales/Solicitations Will Occur (Check all that apply): Private Property Sidewalk Park Street

4. CRIMINAL HISTORY (Not required for Charitable/Religious Organizations)

Have you ever been convicted of the following (include out of state convictions): 1) Any felony offense; 2) Any misdemeanor offense involving a false statement, dishonesty, theft, or an offense of violence; or 3) Any offense listed under Chapter 2907 (sex offenses) of the Ohio Revised Code? YES NO

If yes, state the offense and the penalty imposed: _____

Are you currently, or have you ever been, required to register as a sex offender: YES NO

If yes, state the offense, conviction date, and sentencing court: _____

Peddlers ONLY: All peddlers MUST provide a current background check (not more than 30 days old).

5. LICENSING/INSURANCE REQUIREMENTS (Must Initial)

All Peddlers or Solicitors MUST provide proof of: (1) motor vehicle insurance that meets or exceeds Ohio’s mandatory minimum coverage requirements and (2) a valid driver’s license.

All Street Peddlers MUST provide proof of: (1) valid food/alcohol vendor’s permit/license, (2) a valid driver’s license, (3) motor vehicle insurance that meets or exceeds Ohio’s mandatory minimum coverage requirements and (4) proof of insurance in limits not less than one million dollars (\$1,000,000.00) combined single limit coverage for property damage and bodily injury.

6. ACKNOWLEDGEMENT/RELEASE OF LIABILITY/SIGNATURE

By my signature below, I acknowledge the following: I, the applicant, am responsible for providing all fees, documents, and information necessary to meet the requirements of this application and that even if I provide such, it is no guarantee that my registration will be approved by the City of Lancaster; the information contained in this application is true and accurate to the best of my knowledge; that I have read Chapter 751 (Peddlers) of the Lancaster Codified Ordinances and will act in good faith to comply with the same; that I will conduct sales or solicitations only at the time and place, and in the manner prescribed by the Service Safety Director; that I will not make or perpetuate any false statement, deception, dishonesty or fraud in connection with the operation of my business pursuant to this application; I will not call upon, knock at the door, or ring the doorbell of any residence in the City where there is posted a “No Soliciting” sign or words of similar import; I will not enter, attempt to enter, or remain at any home without the consent of an adult resident; I will not make unlawful noises in the furtherance of my business; all vehicles used in the furtherance of my business will be operated by properly licensed drivers; that my registration may be revoked for a violation of any of these conditions as determined by the Service Safety Director; my application fee is non-refundable; I am solely responsible for any loss or liability incurred in the event my registration is revoked; I, and the organization I represent, agree to defend, indemnify, and hold harmless the City of Lancaster against any and all claims for damages, liability, or loss that may arise from my/our sales or solicitations in Lancaster; I verify that I have read and completed this application in its entirety.

FOOD VENDORS ONLY: I have obtained all required permits from the Fairfield County Department of Health and will otherwise comply with all laws and regulations regarding the sale, storage, preparation and/or distribution of any food or other item designed for human consumption.

ALCOHOL VENDORS ONLY: I have obtained all required permits from the Ohio Department of Commerce, Division of Liquor Control and will otherwise comply with all laws and regulations regarding the sale, storage and/or distribution of alcohol.

Applicant’s Signature: _____ **Date:** _____

7. CHECKLIST

Solicitor		Peddler		Street Peddler	
	Application		Application		Application
	Driver's License		Driver's License		Driver's License
	MV Insurance		MV Insurance		MV Insurance
	Criminal Background Check		Criminal Background Check		Liability Insurance
	Fee		Fee		Food/Alcohol Permits
					Fee

REGISTRATION FOR APPLICATION NUMBER _____
TO BE COMPLETED BY SERVICE SAFETY DIRECTOR'S OFFICE

Based on the information and assurances set forth in the above application, the attached Application for a City of Lancaster Solicitor, Peddler, Street Peddler Registration is hereby: **APPROVED / DENIED** (*circle one*) as of the date set forth below, together with the following terms and conditions (*include any time, place, and manner restrictions*): _____

The following fee(s) shall apply (Check all that apply):

<input type="checkbox"/>	Single Day Peddler Permit (\$1.00/day)	Number of Permits to be Issued:
<input type="checkbox"/>	Weekly Peddler Permit (\$5.00/week)	Number of Permits to be Issued:
<input type="checkbox"/>	Yearly Peddler Permit (\$15.00/year)	Number of Permits to be Issued:
<input type="checkbox"/>	Street Peddler Permit (\$25.00/year)	Number of Permits to be Issued:
<input type="checkbox"/>	Applicant is exempt from fees (Charitable or Religious Organization)	

Total Number of Permits: _____ Total Cost: _____

Paid: YES or NO Cash or Check Receipt No. _____
 Check No. _____

This Registration will expire on _____, 20____ or one year from the issue date set forth below, whichever is earlier.

AUTHORIZED BY: _____ DATE: _____