

CITY OF GRENVILLE

APPLICATION FOR SOLICITATION PERMIT

Charitable organizations desiring a permit to conduct a solicitation campaign must complete the following application and submit it to the Office of the Chief of Police no later than five (5) days prior to the desired solicitation date.

A \$30.00 non-refundable fee must be submitted along with the application. Please read the ordinance governing charitable solicitations carefully before completing this application.

1. Name of non-profit organization sponsoring the solicitation drive:

2. Address of non-profit organization:

National: _____

State: _____

Local: _____

3. Names, addresses, and phone numbers of officers and/or representatives:

NATIONAL:

Name: _____ Address: _____ Phone: _____

STATE:

Name: _____ Address: _____ Phone: _____

LOCAL:

Name: _____ Address: _____ Phone: _____

4. Has this non-profit organization or any of its officers or solicitors been convicted of any offense related to solicitation in the past five (5) years? Yes _____ No _____

5. Purpose of planned solicitation: _____

6. Date(s) and time of solicitation: _____

7. Name the specific area of the City in which the solicitation will take place:

8. Approximate number of volunteer workers: _____

9. Type of solicitation permit requested:

_____ Door to door	_____ Walk-a-thon, bike-a-thon, etc.
_____ Sidewalk	_____ Merchant
_____ Sale / benefit Affair	_____ Other _____

10. Will the solicitation be conducted on private property? ____Yes ____ No

If yes, has permission been obtained for the solicitation? ____Yes ____ No

11. Does your organization have a valid solicitation license issued by the Secretary of the North Carolina Department of Human Resources?

_____ Yes _____ No

If no, is your organization exempt from the licensing provisions of the North Carolina General Statutes? ____ Yes ____ No

I certify that the above statements are true and correct to the best of my ability and knowledge, and I understand that any violation of the rules and regulations governing solicitations will result in revocation of the permit.

Organization: _____

By: _____

Telephone No.: _____ Date of Application: _____

RETURN THE COMPLETED APPLICATION TO:

Logistics Division Commander
Greenville Police Department
P.O. Box 7207
Greenville, NC 27835
(252) 329-4101

Approved and Issued: _____

Date: _____