

VILLAGE OF OSWEGO

DEPARTMENT OF POLICE

3355 Woolley Road ~ Oswego, IL 60543



Emergency: 911 Non-Emergency: (630) 554-3426 Administration: (630) -551-7300 Fax: (630)554-9379

PEDDLERS, SOLICITORS, AND ITINERANT MERCHANTS LICENSE APPLICATION

(Please return completed Application and Fee to Village of Oswego Police Department)

Business requesting	Solicitors permit:				
Business Phone Nun	nber				
Applicant Name:			Date:		
Date of Birth:	SSN:	Daytime or cel	Daytime or cell number:		
Current Address:					
		State:			
Length of time at cur	rrent address:				
Height:	Weight:	Eye Color:	Hair Color:		
	Driver's Lice		State Issued:		
Pre	vious Residence Inforr	nation (if current residence less t	han three (3) years)		
Previous Address:					
		State:	Zip:		
	Name of Current	Employer (this section must be o	completed)		
Address:					
		State:			
Length of Employme		··· 1 1 1 1 1	(2)		
	Previous Employer (if at current employer less than the	nree (3) years)		
Name of Employer:					
Address:					
~!		~	Zip:		

	Addition	al (this section m	ust be comp	leted)		
Date of Any Previous App	olications for this	type of permit (l	ist City and	State): _		
Has previous license ever	been revoked:		Yes	/ No		
Any prior conviction/viola	ation of this Ordin	nance or other in	another Illin	ois Mun	icipality: Yes	/ No
Are you a registered sex o		Yes	/ No			
Any felony convictions of	l law of the U.S.	? Yes	/ No			
List any additional inform	ation (if necessar	y)				
The undersigned does here true and correct.	eby state under po	enalties of perjur	y that all stat	ements	in the foregoing	application are
			Date	:		
Signature of applicant						
Print Name						
		Fees				
All Fees payable at the Os	wego Law Enfor	cement Center lo	ocated at 335	5 Wooll	ey Road, Osweg	go, IL.
LICENSE FEE						
Please select type:	(Circle one)	Annual		Fees:	\$100	
		Monthly x	mos.		\$50	
		# of Ado	ditional App	licants x	\$5.00	
The above reference fees a person shall be applied to		• '				rs (\$5.00) per
FINGERPRINT FEE – b	nelow to he comn	leted hy office ne	rsonnel			
THIODKI MINITED	verow to be comp	Livescan fee	<u>rsonner</u>		\$34.25	
		Non-resident h	ome or busir	ness	\$40.00	
			Clerk initials	s:	_ total Fees Paid	1: \$
			Total # of Pe	ermits to	be issued/cover	ed:

CONSENT TO CONDUCT BACKGROUND CHECK

TO WHOM IT MAY CONCERN

I authorize and empower the Village of Oswego Police Department to obtain, prepare, use and furnish information concerning my general reputation, personal characteristics and mode of living through correspondence or personal interviews with neighbors, friends of associates or others with whom I am acquainted or who may have knowledge concerning any of above items.

Upon written request, I understand that said Police Department would provide me with information regarding the scope of the investigation if one was/is made.

Signature:	
Address:	
	-
Date:	