Village of Weston, Ohio APPLICATION FOR VENDOR/SOLICITOR LICENSE

Company and/or Applicant Na	ime		Federal ID # o	r SS#
	Amerika			
Business Address	Home Address		Phone Number	rs (list all)
Please list the names, if any, license was also required.			onducted busine	ess in, where a
Please provide a brief descript	tion of the business	and/or goods to	be sold:	
6	· · · · · · · · · · · · · · · · · · ·	*		
Please list the names of any/ on behalf of the company liste				
If you will be using a vehicle, v	what is the license pl	ate number?		
Vehicle Make/Model/Year/Cole	or:			
Before the application will be conditioned individual listed above (see information village of Weston, PO Box 354 each person (driver's license, ID of the condition will be conditioned in the cond	rmation sheet attache , Weston, OH 43569.	d). Please have We also require	these results ser a copy of picture	t directly to the
Please allow <i>at least</i> one week will be contacted at the phone no residents and \$15 for non-residents	number(s) or address	listed above. The	application fee	
Signature of Owner or Authoriz	zed Individual	Date Submitte	ed (mm/dd/yy)	
Printed Name and Title				

<u>Note</u>: The company must notify the Village **immediately** any time a <u>new</u> individual (not listed on this form) will be soliciting on their behalf. An amended form must be submitted (approved by Sheriff), along with photo identification. By signing below, you are certifying that you understand the rules and ordinances of the Village of Weston in relation to door-to-door sales. You also agree not to harass or cause harm, financial or otherwise, to any residents of the Village of Weston.

VILLAGE CERTIFICATION

Date Received:	
Date reviewed by Council:	
Approved/Denied:	Company and/or Applicant Name
If denied, list reason:	
	VILLAGE SEAL OF APPROVAL
Signature of Authorizing Individual	tusiness Address
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Printed Name, Title	oense was also required.
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