SOMERS POINT MUNICIPAL CODE SECTION 202-30 PERMIT APPLICATION FORM B

THIS FORM TO BE USED ONLY BY APPLICANTS FOR A PERMIT AS A NONCOMMERCIAL SOLICITOR OR CANVASSER UNDER SECTION 202-30 OF THE SOMERS POINT MUNICIPAL CODE

** APPLICANT INFORMATION **

NOTE: IF APPLICANT NOT APPLYING FOR A PERMIT AS A NONCOMMERCIAL SOLICITOR OR CANVASSER UNDER SECTION 202-30 , PLEASE CONTACT THE CITY CLERK FOR THE APPROPRIATE FORM DO NOT USE THIS FORM

NON - COMMERCIAL SOLICITOR () NON - COMMERCIAL CANVASSER ()	
APPLICATION IF FOR A PERMIT AS A:	
BUSINESS WEB SITE ADDRESS:	
BUSINESS HOURS AT PRINCIPAL BUSINESS ADDRESS:	
BUSINESS EMAIL ADDRESS:	
BUSINESS TELEPHONE # FAX #	
NAME OF PRESIDENT OR MANAGING MEMBER:	
IF NOT A NEW JERSEY CORPORATION OR PARTNERSHIP, THE NAME AND ADDRESS OF THE REGISTERED AGENT IN NEW JERSEY FOR SERVICE OF PROCESS:	
BUSINESS ADDRESS:	
10 DIGIT NEW JERSEY STATE BUSINESS REGISTRATION NUMBER:	
FEDERAL TAX ID NUMBER:	
APPLICANT'S NAME:	
A COPY OF THE CURRENT NEW JERSEY TAX EXEMPTION CERTIFICATE ()	
IF A NON PROFIT ENTITY A COPY OF THE IRS TAX EXEMPTION LETTER IS ATTACHED () OR	
APPLICANT IS A: FOR PROFIT () OR A NOT FOR PROFIT () ENTITY	
${\sf PARTNERSHIP} \left(\ \right) {\sf OR} \ {\sf A} \ {\sf LIMITED} \ {\sf LIABLITY} \ {\sf PARTNERSHIP} \left(\ \right)$	
APPLICANT IS A: CORPORATION () OR LIMITED LIABILITY CORPORATION ()	
TORM. DO NOT USE THIS FORM.	

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NOTE: THIS APPLICATION SHEET MUST BE COMPLETED FOR EACH PERSON WHO SHALL ENGAGE IN ANY NON- COMMERCIAL SOLICITING OR CANVASSING WITHIN THE CITY OF SOMERS POINT TO COMPLY WITH SECTION 202- 30 OF THE SOMERS POINT MUNICIPAL CODE UNLESS OTHERWISE EXEMPT UNDER SECTION 202-31 OF THE SOMERS POINT MUNICIPAL CODE.

SOLICITOR'S / CANVASSERS'S NAME:
PERMANENT HOME ADDRESS:
LOCAL ADDRESS IF DIFFERENT FROM ABOVE:
Phone # Birth date Physical Description:
SEX (); EYE COLOR () HAIR COLOR ()
SS#
(IN RESPONDING TO THE NEXT QUESTIONS, PLEASE ATTACH SEPARATE SHEETS IF REQUIRED)
NAME, ADDRESS AND PHONE NUMBER OF PERSON (S) IN DIRECT CHARGE OF THE CANVASSING AND / OR SOLICITING ACTIVITES (IF DIFFERENT FROM THE APPLICANT NAMED ABOVE:
THE PURPOSE FOR WHICH THE CANVASSING OR SOLICITING IS TO BE CONDUCTED:
A BRIEF OUTLINE FO THE MANNER AND METHOD TO BE USED IN CONDUCTING THE CANVASSING OR SOLICITING:

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ROUTE (S) TO BE TAKEN:
THE MAKE, MODEL, YEAR, COLOR AND LICENSE PLATE NUMBER OF ALL VEHICLES TO BE USED BY THE APPLICANT DURING THE PERIOD OF NON-COMMERCIAL CANVASSING OR SOLICITING WITHIN THE CITY AND THE NUMBER OF APPLICANT'S DRIVER'S LICENSE(S) AND THE STATE IN WHICH IT IS ISSUED:
THE TIME(S) AND DATE(S) WHEN SUCH CANVASSING OR SOLICITING SHALL BE MADE, GIVING PREFERRED AND ALTERNATE DATES FOR THE BEGINNING AND ENDING OF SUCH CANVASSING OR SOLICITING.
Application Fee: A non-commercial solicitor or canvasser is not required to pay a Permit

BY SUBMITTING THIS APPLICATION APPLICANT CERTIFIES THAT HE / SHE HAS READ THE GENERAL REGULATIONS CONTAINED IN SECTIONS 202-30 AND 202 – 36 OF THE SOMERS POINT MUNICIPAL CODE AND THE REQUIREMENTS OF SECTION 202-37 (THE "DO NOT SOLICIT LIST") AND AGREES TO COMPLY WITH THOSE REGULATIONS AT ALL TIMES WHILE ENGAGED IN ANY PERMIT BUSINESS WITHIN THE CITY OF SOMERS POINT.

I DO FURTHER CERIFY THAT THE PERMIT WILL NOT BE USED OR REPRESENTED IN ANY WAY AS AN ENDORSEMENT OF THE PROPOSED CANVASSING OR SOLICITING BY THE CITY OR ANY OF ITS ELECTED OR APPOINTED OFFICIALS, OFFICERS, DEPARTMENTS OR EMPLOYEES.

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FORM B

I CERTIFY THAT I AM OF GOOD CHARACTER AND WILLCONDUCT MYSELF IN A COURTEOUS MANNER AND WILL NOT CONDUCT ANY SOLICITING OR CANVASSING ON PROPERTY OR AT DWELLINGS OR UNITS WHERE "NO SOLICITING" SIGNS OR THE LIKE ARE POSTED OR WHICH APPEAR ON THE "DO NOT SOLICIT" LIST.

I SHALL WEAR IDENTIFICATION ON THE OUTERMOST ITEM OF MY APPAREL WHICH CONTAINS MY NAME AND THE NAME OF THE ORGANIZATION FOR WHICH I AM CANVASSING OR SOLICITING.

IF I AM THE SPONSOR OF THE CANVASSING AND SOLICITNG ACTIVITES I AGREE THAT I SHALL PROVIDE ADVANCE NOTICE IN WRITING TO THE SOMERS POINT POLICE DEPARTMENT IDENTIFYING THE NAMES OF ALL SOLICITORS AND CANVASSERS WHO WILL BE WORKING AND IN WHCH AREAS OF THE CITY, THE DAYS AND THE DESCRIPTION OF ALL VEHICLES TO BE USED WITH LICENSE NUMBERS.

I FUTHER CERTIFY THAT I HAVE COMPLETED THIS APPLICATION AND SUBMITTED ALL REQUIRED ATTACHMENTS.

I hereby certify under penalty of law that the contents of this application are true and correct, and that I have received a copy of Ordinance No. 11 of 2013.

Signature of Applicant	Witness
Date	