

Waltham Police Department

Solicitor Registration Application -- Individual THIS APPLICATION MUST BE FILLED IN COMPLETELY OR IT WILL BE REJECTED. PLEASE PRINT.

Applicant (attach copy o	of government-issued	photo identification):	
Name			// Date of birth (month, day, year)
Permanent residential a	ddress (number, stre	et. town. state. ZIP)	Telephone number
_ocal address:	(, , , , , , , , , , , , , , , , , , ,	, , , , , , ,	
Hotel/motel name	Addres	ss (number, street, town, s	tate)
Past addresses, if any,	during last three year	s (number, street, town, st	rate, period of residence)
1			
,			
Name, address, and tele	ephone number of yo	ur employer:	
Name		Telepho	one number
Address (number, stree	t, town, state, ZIP)		
have worked for this en	mployer since (month	n/year):	
ist the last three comm	nunities (city and state	e) in which you engaged in	soliciting.
1	2		3
Solicitor registration period requested: (90 day maximum)		List any vehicle to b	e used during soliciting:
		Make:	Model:
Starting on	Ending on	Plate number:	State:
Waltham Police Departr	ment will conduct a C	t of my knowledge. I under riminal Background Check as and penalties of perjury.	on me and the information
	 Name		 Date