

HAZLET TOWNSHIP - SOLICITOR'S PERMIT APPLICATION

HOURS OF SOLICITATION

9:00 A.M. TO 9:00 P.M.

NAME , ADDRESS AND PHONE NUMBER OF APPLICANT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME AND ADDRESS OF ORGANIZATION: \_\_\_\_\_

\_\_\_\_\_

DATE LICENSED REQUIRED: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

NATURE OF BUSINESS OR GOODS TO BE SOLD: \_\_\_\_\_

\_\_\_\_\_

NAMES AND ADDRESSES OF OFFICER OR DIRECTORS OF ORGANIZATION:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARE ORDERS TO BE TAKEN FOR FUTURE DELIVERY OF GOODS OR PERFORMANCE OF SERVICES? IF YES, GIVE NAME AND ADDRESS OF THE AGENT OR PERSON DESIGNATED TO RECEIVE SERVICE OF PROCESS OR COMPLAINTS IN THE STATE OF NEW JERSEY.

\_\_\_\_\_

\_\_\_\_\_

LIST BELOW THE NAMES AND ADDRESSES OF REPRESENTATIVE(S) SOLICITING:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sworn and subscribed before me  
a Notary Public of New Jersey  
this \_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Applicant and Date

\_\_\_\_\_

\_\_\_\_\_

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Chief of Police

\_\_\_\_\_

Clerk's Office:

License Number : \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Fee: \_\_\_\_\_ Expiration Date: \_\_\_\_\_