

DOOR TO DOOR SOLICITOR PERMIT

NAME OF ORGANIZATION: _____

ADDRESS: _____,city _____, State _____ zip _____

Reason to solicit: _____

Dates of soliciting: _____

(cost: \$25.00 per day per person)

Names of Solicitors: _____ Drivers License # _____

_____ Drivers License # _____

_____ Drivers License # _____

_____ Drivers License # _____

_____ Drivers License # _____

_____ Drivers License # _____

_____ Drivers License # _____

_____ Drivers License # _____

Type of Vehicle(s): _____ License # _____

CONTACT PERSON _____ **PHONE #** _____

Please complete and return with fee to: City of Kentwood, City Clerk
4900 Breton Ave.
Kentwood, MI 49518

For questions call: 616-554-0729

