

COMMUNITY AND ECONOMIC DEVELOPMENT

CHECKLIST FOR A SOLICITOR LICENSE

ALL APPLICANTS MUST REMIT THE FOLLOWING DOCUMENTS FOR PROCESSING

- Completed application for the Solicitor License
- Completed Hold Harmless Agreement
- Copy of the Good Standing Certificate issued by the IL Secretary of State (for LLC, LLP and Corporations)
- Copy of the Assumed Name Certificate issued by the County Clerk (for sole proprietors)
- Copy of Current Driver's License/ State ID for the owner applicant listed on the application
- \$2,500.00 License Surety Bond (if applicable)
 - Payment of \$100.00 (license will be valid for 60 days)

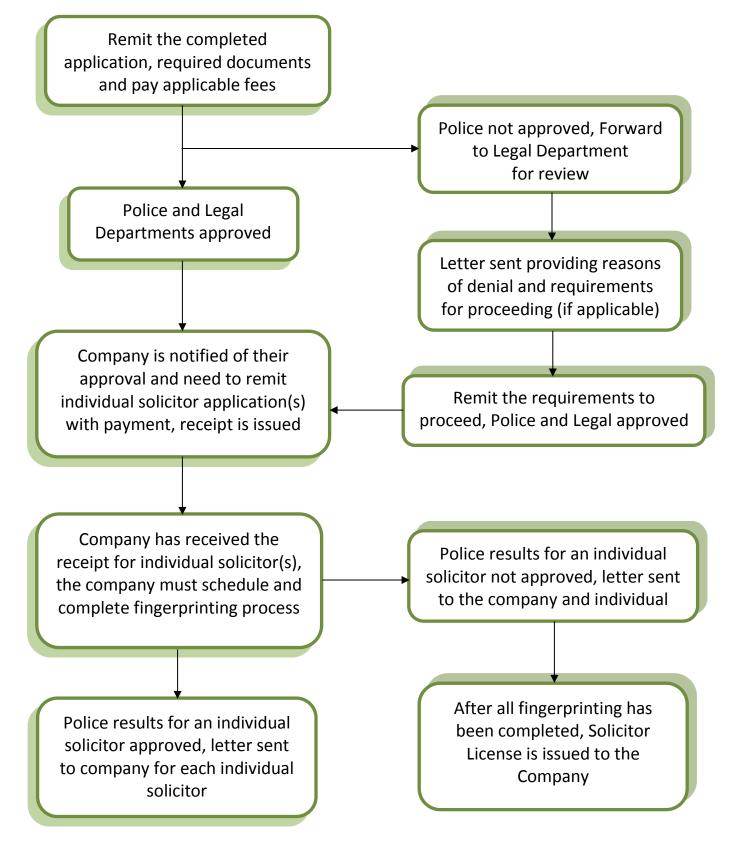
DEPARTMENT PHONE NUMBERS FOR FURTHER QUESTIONS OR CONCERNS

- <u>Legal Department / 847-391-5303</u> For information on the municipal ordinance pertaining to solicitation
- <u>Police Department / 847-391-5414</u> For information on scheduling for fingerprinting. Must have a receipt of payment issued by the Licensing Division prior to scheduling of appointments.
- <u>Licensing Division / 847-391-5366</u> For information on registration requirements, licensing requirements and status of an application



1420 Miner Street Des Plaines, IL 60016 P: 847.391.5366 desplaines.org

PROCESS FOR A SOLICITOR LICENSE





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APPLICATION FOR THE SOLICITOR LICENSE

SOLICITING COMPANY INFORMATION

Name:	Phone #:		
Address:	FEIN #:		
City:	State:	Zip:	
Representative:	Title:		
Driver's License #:	Email:		
REPRESENTING COMPANY INFORMATION			
Name:	Phone #:	Phone #:	
Address:	FEIN #:	FEIN #:	
City:	State:	Zip:	
DESCRIPTION OF THE SOLICITATION Explain in detail the good, services, donations, funds,	, or information to be provided, solicite	d and/or sold.	
Requested dates for solicitation (license valid for 60 of	days):		

If your individual solicitor(s) will be requiring cash deposits, taking orders for cash on delivery purchases, or a contract of agreement for the sale of any goods and/or services to be performed in the future, a license surety bond in the amount of \$2,500 will be required with your remittance.

YES

Based on the above, will a bond be required?

		NO
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Initials of Representative

ATTESTATION

I certify that I and any individual soliciting for the company/organization within the City of Des Plaines have never been convicted of, plead guilty to, been found guilty of a felony or any offense involving bodily harm, fraud, theft, deceptive practices in a court of law or administrative tribunal.

I certify that I and any individual soliciting for the company/organization will abide by the rules for solicitation provided to me and will conduct themselves in a professional and respectful manner at all times during solicitation. Improprieties of solicitation will result in an immediate suspension of the Solicitor License, incarceration and/or additional legal action taken by the City of Des Plaines.

I certify the above information is true and accurate to the best of my knowledge. I further understand that any false statement or omission of information may be cause for suspension, revocation or denial of the license.

Signature:

Date:

Verified By: _

RELEASE AND HOLD HARMLESS AGREEMENT FOR THE SOLICITOR LICENSE

	(organization/company) recognizes and acknowledges that there
are certain risks associated with soliciting door to	o door within the City of Des Plaines. By signing the license application,
	(organization/company) does hereby agree to assume complete
risk of any injuries, damage, or loss regardless of	the type or severity, which anyone employed or used as a volunteer by
	(organization/company) may sustain as a result of soliciting
activities on public property in the City of Des Pla	ines.
	(organization/company) does hereby fully release and discharge
the City of Des Plaines, its officers, agents and en	nployees from any and all claims for injury, damage, or loss sustained by
any of its employees or volunteers connected to	soliciting activities on public property in the City of Des Plaines.
	(organization/company) agrees to indemnify and hold harmless
and defend the City of Des Plaines, its officers, ag	gents and employees from any and all claims, including attorney's fees,
resulting from injury, damage or loss sustained b	y any of its employees or volunteers, or caused by them, and arising out
of, or in any way connected or associated with, s	oliciting activities on public property in the City of Des Plaines.
I,	(representative) state that I am an authorized representative of
	(organization/company) with the authority to execute this
agreement. I have read and fully understand the	above release and hold harmless agreement, and execute it on behalf
of, and as the duly authorized representative of	(organization/company).
Signature of Representative	-

Print Name

Organization/Company

Address

Phone #

City/State/Zip

SUBSCRIBED and SWORN to before me this

_____ day of ______, 20 _____,

NOTARY PUBLIC (STAMP SEAL BELOW)



CHECKLIST FOR THE INDIVIDUAL SOLICITOR

ALL APPLICANTS MUST REMIT THE FOLLOWING DOCUMENTS FOR PROCESSING

Completed application with checklist attached

- Copy of valid Driver's License/State ID
- Copy of Identification Badge (must include picture, name and organization/company name
- Affidavit attesting to the regulations of solicitation (must be signed in witness of a notary public)
 - \$50.00 Fingerprinting Fee
 (All individual solicitor applicants must be fingerprinted by the Des Plaines Police Department)

REGULATIONS FOR THE FINGERPRINTING PROCESS

- The Individual Solicitor Registration cannot be remitted until the Company/Organization has remitted the application for a Solicitor License and has received the approval letter from the Licensing Division.
- "Walk in Basis" at the Des Plaines Police Department for fingerprinting is prohibited.
- A receipt for payment and a copy of the remittance for an Individual Solicitor Registration must be obtained *prior to* the scheduling of a fingerprinting appointment.
- The individual must present the receipt for payment and a copy of the remittance to the officer at the fingerprinting appointment. Failure to do so will result in forfeiture of the appointment.

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INDIVIDUAL SOLICITOR REGISTRATION

INFORMATION OF THE INDIVIDUAL SOLICITOR

Name:	Phone #:
	Date of
Home Address:	Birth:
City:	State: Zip:
Driver's License #:	Email:
REPRESENTING COMPANY INFORMATION	
Name:	Phone #:
Manager:	Email:
SOLICITING COMPANY INFORMATION	
Name:	Phone #:
Address:	FEIN:
City:	Zip:Zip:
Manager:	Email:

ATTESTATION

I certify that I have never been convicted of, plead guilty to, been found guilty of a felony or any offense involving bodily harm, fraud, theft, deceptive practices in a court of law or administrative tribunal.

I have read and will abide by the rules for solicitation and will conduct myself in a professional and respectful manner at all times during solicitation. Improprieties of solicitation will result in an immediate suspension of the Solicitor License, incarceration and/or additional legal action taken by the City of Des Plaines.

I certify the above information is true and accurate to the best of my knowledge. I further understand that any false statement or omission of information may be cause for suspension, revocation or denial of the Certificate.

Signature: ___

Date: _____

Must be signature of the individual listed above on the application

AFFIDAVIT FOR SOLICITATION

The undersigned Affiant, having been first duly sworn, on oath say, state as follows:

1) That Affiant, _____

Name of Individual Solicitor

_____, is representative for the business

Employer Name, Business Address, City, State Zip

2) That as a representative for the above business, I confirm that I will conduct solicitation activities only between the hours of nine o'clock (9:00) A.M. and nine o'clock (9:00) P.M. Monday through Saturday, no soliciting is permitted on Sundays or legal holidays.

3) That as a representative for the above business, I confirm that I will not conduct solicitation at locations displaying any notice exhibited by a residence or business indicating that solicitors are not welcome or not invited.

4) That as a representative for the above business, I confirm that I will immediately leave a premises upon receiving a request to leave or cease conducting solicitation from anyone present at the premises.

5) That as a representative for the above business, I understand it is unlawful to cheat, deceive or fraudulently misrepresent any product or the price thereof, or to barter, sell or peddle any goods, merchandise or wares other than those specified in my permission letter.

6) That as a representative for the above business, I understand that I may be charged with a criminal trespass to real property (720 ILCS 5/21-3) should I conduct solicitation at locations displaying any notice exhibited by a residence or business indicating that solicitors are not welcome or not invited and/or fail to leave a premises upon receiving a request to leave or cease conducting solicitation from anyone present at the premises.

7) I certify the information above to be true. I also understand that if any information provided in this affidavit is falsified, as a representative, I will be subject to an Administrative Hearing and possible fines.

Print Name

Signature

Date

SUBSCRIBED and SWORN to before me this

_____ day of ______, 20_____.

(STAMP SEAL BELOW)

NOTARY PUBLIC