

**CITY OF GRAYVILLE**  
**APPLICATION FOR PEDDLER'S PERMIT**

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Driver's License/State ID Number: \_\_\_\_\_ State Issued: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Physical Description:**

Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Insurance Company Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Firm, Person or Corporation the Applicant Represents or is Employed by:

Employers Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

(Street)

(City)

(State)

(Zip)

Is Company/Business a: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ or Individual \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Vehicle Information: (Provide the information for the vehicle that will be used while you are peddling in Grayville)

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ Plate No.: \_\_\_\_\_ State Issued: \_\_\_\_\_

Describe the Items/Subject Matter you will be Peddling/Soliciting:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you every been issued a Peddler License for the City of Grayville \_\_\_\_\_ Yes \_\_\_\_\_ No

Has your Grayville License ever been revoked or denied: \_\_\_\_\_ Yes \_\_\_\_\_ No, if yes explain:

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Have you ever been convicted of a felony or class A misdemeanor , within the last five (5) years, under the laws of the State of Illinois, any other State, or under Federal Law? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, explain: \_\_\_\_\_

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Are you a registered sex offender? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, explain:

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Have you ever been convicted of a violation of any of the provisions of this article, or any provisions of any ordinance of any other city or village in Illinois regulating your peddling activity? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain: \_\_\_\_\_

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Have all employees been trained in the handling of items they are going to peddle: \_\_\_\_\_ Yes \_\_\_\_\_ No

Have all employees been trained in how to deal with customers in a responsible manner? \_\_\_\_\_ Yes \_\_\_\_\_ No

I, \_\_\_\_\_, do solemnly swear that the forgoing information is true and complete to the best of my knowledge. I have read and agree to abide by the Peddler Ordinance of the City of Grayville.

I understand that a thorough background check will be conducted. I also understand I cannot knock on doors with a "NO PEDDLING OR SOLICITING" sign. I will leave a residence as soon as I am asked without question. I will only peddle during the approved times of 8:00 A.M. – 5:00 P.M. I will not peddle within 200 feet of a playground or school during the time that organized recreational activities are in progress.

\_\_\_\_\_  
Applicant's Signature/Date

\_\_\_\_\_  
Reviewer's Signature

Attach to Application: Certificate of Insurance

Fee \$25.00 \_\_\_\_\_

Permit Dates: \_\_\_\_\_ to \_\_\_\_\_