



Mail, Fax, or Scan Applications to:

909 14th Street
 Plano, Texas 75074
 T: 972-941-2507 F: 972-941-2567
 Email: pdpermits@plano.gov

Business Solicitor's Permit Application

Business Information

Business Name		Type of Business (e.g. realty, lawncare, etc.)	
Address	Suite/Apt#	Phone Number	
City	State	Zip	Email
Business Website		How do you want to receive your permit? Email <input type="checkbox"/> Pick up <input type="checkbox"/>	

Business Owner Information

Name		<i>(If using personal vehicle, fill in the information below)</i>		
Date of Birth	Year	Make	Model	
Driver's License #	State	Color	License Plate #	State
Have you been convicted of, pled No Contest to, or been placed on Deferred Adjudication for violating any city, state, or federal law while soliciting or in connection with a solicitation? <i>If yes, please explain</i>				Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been convicted of, pled No Contest to, or received Deferred Adjudication for any felony? <i>If yes, please explain</i>				Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you required to register as a Sex Offender?				Yes <input type="checkbox"/> No <input type="checkbox"/>
I have attached a copy of my driver's license or I.D.				Yes <input type="checkbox"/> No <input type="checkbox"/>
I have attached a copy of all materials (flyers, samples, etc.) that will be handed out.				Yes <input type="checkbox"/> No <input type="checkbox"/>
All Individual Solicitor Applications are completed and attached.				Yes <input type="checkbox"/> No <input type="checkbox"/>

By signing below, I authorize the City of Plano Police Department to review my criminal history information for criminal justice purposes and to verify the information I have provided herein. I acknowledge that I have read and fully understand the City of Plano Solicitor's Ordinance. I am aware that I may be cited by the Plano Police Department if I fail to comply with the Solicitor's Ordinance.

Signature _____ **Date** _____

Police Use Only

PD Records: Date Received: _____ Receipt # _____ Initials: _____

Permit Coordinator: Business Permit # _____ Solicitor Permit # _____