



MORGANTOWN
Finance Department

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COMMERCIAL SOLICITORS AND CANVASSERS LICENSE APPLICATION

PLEASE INCLUDE STATE BUSINESS REGISTRATION CERTIFICATE AND \$20.00 FEE

INDIVIDUAL'S NAME: _____ EMAIL: _____

LOCAL ADDRESS _____

PERMANENT ADDRESS: _____

DRIVERS LICENSE NUMBER: _____

RESIDENT OF COUNTY: YES _____ NO _____

MAKE AND MODEL OF VEHICLE: _____

LICENSE NUMBER OF VEHICLE: _____

BIRTHDATE: _____ SEX: _____ HAIR COLOR: _____ EYE COLOR: _____

HEIGHT: _____ WEIGHT: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: _____

POSITION WITH COMPANY: _____ LENGTH OF EMPLOYMENT: _____

NATURE OF BUSINESS AND GOODS TO BE SOLD: _____

PROPOSED METHOD OF DELIVERY FOR ORDERS OR GOODS TO BE SOLD, AND WHERE ARE THEY COMING FROM: _____

LENGTH OF TIME SOLICITOR WILL NEED THE RIGHT TO SELL: _____

REFERENCES: (PERSONS MUST HAVE KNOW YOU FOR 6 MONTHS OR LONGER)

NAME: _____ PHONE OR EMAIL: _____

HAS APPLICANT EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? _____

IF YES FILL IN BELOW:

DATE: _____ CITY: _____ STATE: _____

I HEREBY CERTIFY THAT THE ABOVE STATED FACTS ARE TRUE AND THAT I WILL CONDUCT ANY SOL/GITA TION I CANVASS IN ACCORDANCE WITH THE ORDINANCE ADOPTED 3-20-2018 BY THE CITY OF MORGANTOWN COUNCIL.

SIGN: _____

PRINT: _____ TITLE: _____