



PO BOX 998
COOKEVILLE, TN 38503

(931) 520-5250
(931) 520-5251

**APPLICATION FOR
CHARITABLE/NON-PROFIT PERMITS**

1. **NAME OF APPLICANT** _____
BIRTH DATE _____ **SOCIAL SECURITY #** _____ **DRIVER'S LICENSE #** _____

(ADDITIONAL ASSISTANTS ON SEPARATE PAGE)

APPLICANT'S PERMANENT HOME ADDRESS _____

PHONE # _____

2. **NAME OF ORGANIZATION/PERSON WHICH IS REPRESENTED:** _____
PHONE # _____

3. **TYPE OF GOODS TO BE SOLD/PRODUCT PEDDLED/ OR PURPOSE OF SOLICITATION:**

4. **VEHICLE** _____ **LICENSE PLATE #** _____ **REGISTERED COUNTY** _____
(USE ADDITIONAL SHEET, IF NEEDED)

5. **THE DATES & TIMES REQUESTING THE RIGHT TO SOLICIT IS DESIRED:**

*****9:00AM – DUSK ONLY (WHEN GOING TO RESIDENCE) *****

6. **LIST NAMES AND ADDRESSES OF TWO (2) REPUTABLE, NON-RELATED CITIZENS WHO CERTIFY AS TO THE APPLICANT'S GOOD MORAL REPUTATION AND BUSINESS RESPONSIBILITY.** (Must know applicant a minimum of two (2) years.)

(A) **NAME:** _____
ADDRESS: _____
PHONE : _____ (HOME) _____ (WORK)

(B) **NAME:** _____
ADDRESS: _____
PHONE: _____ (HOME) _____ (WORK)

7. **APPLICANT SHALL STATE WHETHER HE HAS BEEN CONVICTED OF ANY CRIME (FELONY), OR MISDEMEANOR, OR FOR VIOLATING ANY MUNICIPAL ORDINANCE; THE NATURE OF THE OFFENSE; AND, THE PUNISHMENT OR PENALTY ASSESSED.** YES _____ NO _____

IF YES, EXPLAIN

Applicant hereby solemnly swears that each and every statement in the above application is true and correct and agrees that, if any statement therein is false, it will be grounds to deny issuance of the permit or the permit issued may be revoked. Applicant agrees to abide by Cookeville Municipal Code Title 9, Chapter 3. After permit has been issued, if the applicant or assistants listed are convicted of any crime (felony), misdemeanor, or violating any municipal ordinance, they are subject to a fine and suspension of their permit pending the revocation hearing.

This _____ day of _____, _____.

Signed _____

City Clerk/Notary Public