

## **CITY OF HEATH**

200 Laurence Drive

Heath, Texas 75032

Phone 972.771.6228 \* Fax 972.961.4932 \* Email: <u>CityHall@HeathTX.com</u>

## **APPLICATION FOR SOLICITATION PERMIT**

Pursuant to Chapter 110, Solicitation, City of Heath Code of Ordinances

Name of Business			
Nature of Business			
Business Address	City	State	Zip
Name of Agent/Representative/Employee	·	·	
Date of Birth	Driver's License No.	State	
Other Identification Phone			
Business Address	City	State	Zip
Supervisor/Manager Name			
Supervisor/Manager Address	City	State	Zip
Have you (agent/employee) been convicted of a felony If Yes, please describe	within the last five (5) years?		
Permit Fee: \$10 for in-state enterprises + \$5 per agent/em	ployee		
Method of Payment	Cash	Money Order	Credit Card
Amount Received	Date	Time	
Applicant Signature	Date	Time	
Witness Signature	Date	Time	
Permit Application: (circle one)	APPROVED	DENIED	
Department of Public Safety Director	Date	Time	