

Town of Falmouth, ME

APPLICATION

DOOR-TO-DOOR SOLICITATION PERMIT

Name of Registrant	
Local Address of Registrant	Local Phone #:
Permanent Address of Registrant	Permanent Phone #:
	Date of Birth:
Physical Description of Registrant	Car Make & Model:
	License Plate #:
Name of Employer:	
Address of Employer:	Phone #:

Types of Goods to be Sold:

**Transient Sale
Registration**

Yes _____ **No** _____

**Police Background
Check**

Approved _____
Denied _____

The applicant hereby certifies that they have received a copy of the Town's regulations and is aware of the local requirements regarding door-to-door solicitations.

Applicant's Signature: Date:

Town Clerk's Approval:

Date: