

City of Erlanger Solicitor Registration Ordinance # 2214 www.ci.erlanger.ky.us

Date _____ (expires in 1 year)

	Authorize	ed by
Solicitor's Name:		
Last	First	Middle
Aliases		
Date of Birth	Pl	ace of Birth
Solicitor's Home Addr	ess and Phone N	umber:
Street		City
State	Zip	
Phone		
Solicitor's Operator Li	icense Informatio	on: (Copy of License Required)
License Number		State
Conial Consuity Nyumban		
Social Security Number		
Social Security Number List Any Criminal Histo		
List Any Criminal Histo	ory	
List Any Criminal Histo	ory	
List Any Criminal Histor	oryormation: (Vehic	
List Any Criminal Histor Solicitor's Vehicle Info	oryormation: (Vehic	le to be used while Soliciting)
List Any Criminal Histo Solicitor's Vehicle Info Make	oryormation: (VehicalModelRegin	le to be used while Soliciting) Year
List Any Criminal Histor Solicitor's Vehicle Info Make Registration Number Employer's Name and	oryormation: (Vehic	le to be used while Soliciting) Year
List Any Criminal Histor Solicitor's Vehicle Info Make Registration Number Employer's Name and Last	oryPory	le to be used while Soliciting) Year istration Year Vehicle Color

Please return completed form to the Erlanger Police Department.