

NON-EXEMPT SOLICITATION SUPPLEMENTAL PERMIT

CITY OF YORBA LINDA
4845 CASA LOMA AVE
YORBA LINDA, CALIFORNIA 92886
(714) 961-7150

APPLICATION FEE: \$100.00

FIRST-TIME APPLICANT

FINGERPRINT FEE: \$ 52.00

APPLICANT RENEWAL

PERMIT NO. _____

NAME AND ADDRESS OF PERSON BY OR WITH WHOM APPLICANT IS EMPLOYED OR ASSOCIATED IN THE BUSINESS OF SOLICITATION:

APPLICANT: _____

ADDRESS: _____

PHONE NO: _____ SOCIAL SECURITY NUMBER: _____

DRIVERS LIC NO. _____ STATE ISSUED BY _____

PHYSICAL DESCRIPTION OF APPLICANT:

BIRTHDATE: _____ AGE: _____ HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ____ IF YES, PLEASE STATE NATURE OF SUCH OFFENSE, AND THE SENTENCE RECEIVED THEREFORE.

THE PERMITTEE GUARANTEES TO SAVE, INDEMNIFY AND KEEP HARMLESS THE CITY OF YORBA LINDA AND ALL ITS AGENTS, OFFICERS, EMPLOYEES, AND OFFICIALS AGAINST ALL LIABILITIES JUDGEMENTS, COSTS AND EXPENSES WHICH MAY IN ANY MANNER OR FORM ARISE IN CONSEQUENCE TO THE ISSUANCE OF THE PERMIT OR ANY WORK PERFORMED IN CONSEQUENCE THEREOF.

DATE: _____ APPLICANT: _____

THIS PERMIT MUST BE IN YOUR POSSESSION AT ALL TIMES WHEN SOLICITING

** CITY CLERK'S OFFICE TO ATTACH A COPY OF THE NON-EXEMPT SOLICITATION PERMIT OF THE PERSON BY OR WITH WHOM THE APPLICANT IS EMPLOYED OR ASSOCIATED

APPROVED: _____ DISAPPROVED: _____

ORANGE COUNTY SHERIFF'S DEPARTMENT

DATE

APPROVED: _____ DISAPPROVED: _____

CITY CLERK'S DEPARTMENT

DATE