



# Cascade Charter Township

5920 Tahoe Dr SE, Grand Rapids, MI 49546  
Phone: (616) 949-1500 Fax: (616) 285-6747

## Solicitation Permit Application Commercial or Business

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I. Application Date*

Permanent Home Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Local Address: \_\_\_\_\_  
*(If different from home address while soliciting) Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Personal Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Other Current Employers: \_\_\_\_\_  
*Name Street Address*

### Soliciting Organization

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State Zip Code*

Organization Phone: \_\_\_\_\_ Organization Email: \_\_\_\_\_

Organization Description: \_\_\_\_\_  
*Goods/Services Sold/Soliciting*

Product Manufactured/Produced: \_\_\_\_\_  
*Street Address:*

Current Product Location: \_\_\_\_\_  
*Street Address*

Product Method of Delivery: \_\_\_\_\_  
*(Mail, Personal Delivery, Etc)*

Area of Cascade being Solicited: \_\_\_\_\_

Length of time Soliciting: \_\_\_\_\_ Appx Dates Soliciting: \_\_\_\_\_  
*(Max 30 Days) Must be 10+ days Post Application*

**Direct Supervisor Information**

Full Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
*Last First M.I.*

Home Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code* Driver's License Number: \_\_\_\_\_

**Names of Solicitors Supervised by Applicant, if any (Each individual must also apply)**

\_\_\_\_\_  
\_\_\_\_\_

**IDs, Background Checks, and Fees**

To be considered, you must attach a copy of your driver's license or other form of original government issued photo personal identification, not a copy, photo, or digital representation of the identification.

A complete and comprehensive background check will be conducted before any solicitation permit is issued. This may include a review of records from the Kent County Sheriff's Department, Michigan State Police, and/or similar records from other states and counties. If the applicant has any civil or criminal warrants outstanding or has been convicted of any crime or offense that, in the Township's reasonable discretion, renders the individual solicitor a potential threat to the general peace and safety of the Township, the permit will be denied. The applicant must inform the Township of any and all changes to the information on their application and any event that would result in a change to the information produced in their background check.

**Permit Fee:** \$25 per permit issued

**Background Check Fee:** Determined at Time of Application

**Certification**

Pursuant to Township Ordinance, each solicitor shall complete a signed statement. Please note a "yes" response is cause for denial of a license.

The license application may be obtained during normal business hours at the Township offices. Such application shall be applied for at least ten (10) business days prior to the date of conducting such solicitation.

I HEREBY CERTIFY that neither this corporation, firm, person, or organization that will be engaged in active solicitation within Cascade Charter Township for me or on my behalf have ever been convicted of a felony and/or a misdemeanor, theft, fraud, assault, or other unlawful offense.

I UNDERSTAND that all solicitation must comply with Chapter 329 Solicitors of the Cascade Charter Township General Ordinance, including the provisions of the Do-Not-Knock Registry.

I HEREBY CERTIFY that answers given here and on the previous pages numbered 1 (the previous page) to 2 (this page) are true and complete to the best of my knowledge.

Have you ever been convicted of a felony? YES  NO

If yes, explain the nature of the offense: \_\_\_\_\_

\_\_\_\_\_  
*Name of Applicant (Print) Signature of Applicant Date*

**Office Use Only**

Date Received: \_\_\_\_\_ Date Approved/Denied: \_\_\_\_\_ Approved/Denied By: \_\_\_\_\_

Reason Denied: \_\_\_\_\_ Permit Fee Paid: \_\_\_\_\_ Valid Until: \_\_\_\_\_