

Application for Solicitor License

Return the follow	wing to City of Frontenac	c, 10555 Clayton Road, Frontenac	c, MO 63131	* <u>Effective 11/15/2005</u> *
	ted application r money order in the prope	er amount (\$5.00 Fee/per day)	3.	Record check
Name of Applica	ant (last, first, middle): _	Date		
Date and Place	of Birth:	Last four		
Physical Descrip (copy of driver's	otion (i.e. height, weight, license, state identificat	hair color, eye color):ion card, passport or other gover	_ nment-issued iden	tification card is required)
Permanent Add	ress:			
Motor Vehicle Ir	nformation:			
Make: Model:		Year:		
Color:				Plate #
*A record chec Missouri Highv		ong with the application from th	ne county in which	h you reside or from the
Description of p	roposed activity:		1	
	•	be substituted for this description		GE, INFORMATION, AND BELIEF.
	Signature and title of ap	pplicant		Date
		(Office Use Only)		
License #:	Date Issued:	Amount Paid \$	Received by	y/Approved by: