



Application for Certificate of Registration

Pursuant to Chapter 5.06 of the Jackson Municipal Code, every person wishing to conduct door-to-door residential solicitations are required to obtain a Certificate of Registration and shall carry that certificate with them at all times when they are soliciting.

Please truthfully and completely answer the following questions and provide the following information:

1. Full Legal Name: _____
(First name) (Full middle name) (Last name)
2. Social Security Number: _____
3. Present Physical Address: _____
4. Past Physical Addresses for Last 3 Years (attach additional sheets if more room is needed) _____

5. Present Mailing Address: _____
6. Date of Birth: _____
7. Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____
Facial Hair: _____
8. Name of the Person, Firm, Corporation, or Association who is your employer or whom you represent (if self employed, give the name of your business):

9. Address of the Person, Firm, Corporation, or Association who is your employer or whom you represent: _____
10. Length of Time Working for Entity Named #8: _____
11. Name and Address of All Employers in the Past 3 Years: (attach additional sheets if more room is needed) _____

12. Fully Describe the Items or entities for which or for whom you Intend to Solicit: (If soliciting for magazines, journals or books, please list titles):

13. Times of day and Dates Requested for Solicitation: _____
14. Have you applied for a Certificate of Registration for soliciting in the Town of Jackson in the past? ___ Yes ___ No Date of Previous Application _____

15. Have you applied for and been DENIED a Certificate of Registration for soliciting in the past? ___ Yes ___ No

16. Have you ever had a Certificate of Registration for soliciting in the Town of Jackson REVOKED? ___ Yes ___ No If so, when and for what reason?

17. Have you ever been convicted of a felony? ___ Yes ___ No If Yes, give the date, offense, and location, including city and state:

18. Name the 3 most recent communities where you have solicited house to house:

19. Describe in full your proposed method of operation:

By signing this document below, I hereby swear and affirm that the information provided in this application is true and correct to the best of my knowledge. I understand that failure to answer each and every question fully and truthfully in this application will result in denial of my application.

Signature of Applicant

Date of Application