VILLAGE OF ATTICA

APPLICATION FOR SOLICITING, HAWKING, AUCTIONEERING

Date:			
Company Name:			
Address:			
State:Zip	:		
Phone #	fax #	E-mail:	
Company Contact Nam	ne		
Nature of Business:			
Period requesting perm	ission:		
Individual representativ	ve soliciting:		
Address:			
Local Contact phone #			
Driver's License #			
Brief description of pro	oduct or service:		

Fee for application is \$25.00 for one day.

Signature: _	 	 	
Date:	 	 	