

TOWNSHIP OF LEBANON
HUNTERDON COUNTY

Municipal Building
530 West Hill Road
Glen Gardner, NJ 08826-6400



Tel. 908-638-8523
Fax 908-638-5957
www.lebanontownship.net

Application for a Solicitor's License

\$100.00 Application Fee

License is good from date of issuance to December 31 of current year

Name of Applicant: _____

Address: _____

Phone Number: _____ Date of Birth: _____

Driver's License #: _____ Social Security #: _____
(Provide Copy)

Physical Description of Applicant: (Age, Height, Color of Hair, Sex, etc.) _____

Describe nature of business and good to be sold: _____

Name and address of employer (include written and sworn authorization from employer to act on its behalf):

Length of time desired to do business: _____

Have you or your employer ever been convicted of any crime or offense, in this State, or any other state?

If answer to the above question is "yes", please give the nature of offense and disposition: _____

By signing this application, you are giving us permission to have a Police background check done.

Date: _____ Signature of Applicant: _____

Office Use Only:

Background Check Completed: _____ Police Chief Signature: _____

Township Committee's Acknowledgement: _____

Municipal Clerk's Signature: _____