## St. Louis County Department of Revenue – Division of Licenses

41 S. Central Avenue, Clayton, MO 63105 – Ph: 314/615-4217, Fax: 314/615-5125

Licensing@stlouiscountymo.gov

## Registration of Restricted Solicitation at Designated Intersections (Non-Profit Organization)

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<u>IMPORTANT:</u> This application must be submitted at least seven (7) days, but no more than ninety (90) days prior to intended solicitation. <u>The total number of days allowed is three (3) days per calendar year.</u>

Date		
Name of Organization		
Mailing Address for ID Cards		
List Names and Addresses of ALL Solicitors who will be representing the non-profit organization:		
Name (First, MI, Last)		
Street Address, City, State, Zip		
Name (First, MI, Last)		
Street Address, City, State, Zip		
Name (First, MI, Last)		
Street Address, City, State, Zip		
Name (First, MI, Last)		
Street Address, City, State, Zip		
Name (First, MI, Last)		
Street Address, City, State, Zip		
Name/Date/Time Period (must be between sunrise and sunset) of Designated Intersections where solicitation is proposed:		

Name of Designated Intersection	Date	Time Period (e.g. 10am – 1pm)

List the name(s) of any designated intersection and the date(s) at which the solicitor(s) have been authorized to solici				
with the CURRENT calendar year:				
MUST BE SIGNED IN FRONT OF A NOTARY PUBLIC				
MOST BE SIGNED IN TROUT OF A NOTARY TO BEE				
STATE OF MISSOURI				
COUNTY OF	}}			
, being duly sw	orn deposes and says, that s/he has read the foregoing report			
	I to make the foregoing report on behalf of the above named ner own knowledge; and that the foregoing report was made for			
the purpose of complying with the requirements of section				
Printed Name of Owner, Partner or Officer	Signature of Owner, Partner or Officer			
Subscribed and sworn before me on the day of				
My commission expires				
Notary Public				