

**TOWNSHIP OF HARMONY  
WARREN COUNTY, NEW JERSEY**

**SOLICITOR'S PERMIT APPLICATION**  
**Pursuant to Township Code Chapter 63**

**APPLICANT:**

Name: \_\_\_\_\_

Local Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Complexion: \_\_\_\_\_

Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ Marks/Scars: \_\_\_\_\_

Social Security #: \_\_\_\_\_

**BUSINESS:**

Describe briefly the nature of business and goods  
sold: \_\_\_\_\_

\_\_\_\_\_.

**EMPLOYER:**

Name of Firm: \_\_\_\_\_

Address of Firm: \_\_\_\_\_

Where product is manufactured: \_\_\_\_\_

Proposed method of delivery: \_\_\_\_\_

Where are goods now located? \_\_\_\_\_

**REFERENCES:**

\_\_\_\_\_

\_\_\_\_\_

**AUTOMOBILE(S) TO BE USED BY APPLICANT:**

Make: \_\_\_\_\_ Year and Model \_\_\_\_\_ Color: \_\_\_\_\_

License Plate # \_\_\_\_\_ Driver's License # \_\_\_\_\_

State of Issuance of Driver's License: \_\_\_\_\_

MISCELLANEOUS:

Length of time for which permit is desired:

\_\_\_\_\_

Names of New Jersey Municipalities in which you have solicited in past three months:

\_\_\_\_\_

\_\_\_\_\_

I have been convicted of a violation of a crime, misdemeanor or violation of a Municipal ordinance.

Yes ( ) No ( )

Nature of Offense: \_\_\_\_\_

Punishment or penalty assessed: \_\_\_\_\_

\_\_\_\_\_

I do solemnly swear that all of the statements contained in the foregoing application are true and correct and I further understand any untrue statement will result in the immediate forfeiting of the permit issued to me.

\_\_\_\_\_  
Signature of Applicant

INSTRUCTIONS:

Two (2) recent photographs, about 2 1/2" x 2 1/2", showing head and shoulders of applicant.

References must be reliable citizen or business firm who will certify to your good character and business respectability or other available evidence as to good character and business responsibility of applicant and his employer.

Fee to accompany application: \$50.00 for one month or any part thereof; \$250.00 for one year or any part thereof.

Prepare application in duplicate.

Permit will not be granted until the issuing authority has completed whatever investigation they deem advisable.

No permit is good for more than one (1) year from date of issuance.

ISSUING AUTHORITY ACTION:

Approved ( ) Disapproved ( )

Reasons (If disapproved): \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Permit No. \_\_\_\_\_

\_\_\_\_\_  
Kelley D. Smith, Municipal Clerk