



PERMIT APPLICATION FOR PEDDLERS, SOLICITORS & ITINERANT MERCHANTS

NOTICE: Pursuant to [Chapter 118 of the Town of Matthews Code of Ordinances](#), individuals are required to obtain a permit, issued by the Town Council, before conducting sales of products and/or services within the community - whether door-to-door or at any temporary outdoor location. A separate permit is required of each individual conducting such sales.

Applications must be submitted to the Matthews Police Department at least ten (10) days in advance of the planned use.

1. Applicant Full Name: _____
 Address: _____
 Phone #: _____ Date of Birth: _____ Social Security #: _____
2. Business represented, if any: _____
 Address: _____
 Phone #: _____ Contact Person: _____ Title: _____
 Web Address: _____
3. Date(s) of Intended Use: _____ through _____
4. Temporary Location (for Itinerant Merchant): _____
5. Product(s) / Service(s) Offered: _____

NOTICE: You are required to provide a complete list below, or attach to this application, of all criminal charges and/or convictions for any felony or any misdemeanor crime involving fraud, theft, or the receiving or possession of stolen goods. Denote the location / jurisdiction of each charge listed. Failure to provide this information will result in denial of permit.

Criminal Charges continued:

I certify that all of the information provided is true and complete and that the issuance of a permit to conduct this business will not occur until a complete criminal background check is completed and a permit issued.

Applicant's Signature: _____ Date: _____

Sworn to, and subscribed before me,
this the ____ day of _____, _____

Notary Public

My commission expires: _____

FOR OFFICE USE ONLY

Application Received By: _____ (Date)
(For Town of Matthews)

- Date forwarded to Police Department for background investigation _____
- Date final report received from Police Department _____
 - Recommended for issuance _____
 - Date for Town Council consideration _____
 - Recommended for denial _____
 - Date communicated to applicant _____
 - Applicant's submission of fingerprints (appeal) _____
 - Date report received & communicated to applicant _____

Permit Issued By: _____ (Date) _____ (Permit #)
(For Town of Matthews)

Permit Expiration Date: _____

For questions about form or ordinance: Town Clerk Lori Canapinno 704-847-4411
Police Records Office 704-845-1973
SolicitorPermits@MatthewsPolice.org