

# Solicitor Permit Applicants

**\*\*NOTE:** Applications, Fingerprinting and Photographing will only be received and/or conducted Mon – Fri (not including holidays) between 8:30 – 11:30AM and 1:00PM – 3:30PM.

## **Application for initial 30 day temporary permit:**

1. Complete the application in its entirety and return with this coversheet attached. (Must present a valid photo I.D. and Social Security card with application. If the applicant does not have their Social Security card, a birth certificate, or valid passport will be accepted.)
2. Must have a check or money order made payable to Treasurer, Hanover County. (Non-Refundable)
3. Upon receipt of your application a background check will be completed in accordance with Hanover County Code.
4. Your fingerprints and a photo will be taken prior to issuance of a permit.
5. Once all information is obtained your application will be processed as soon as possible.
6. If your application is approved and a permit issued, the permit must be carried with you at all times with a valid photo I.D.

## **Application for Renewal of Solicitor Permit:**

1. A solicitor's permit which has expired may be renewed for an additional period of eleven months. Upon the execution of a renewal application the following must be completed: A certification that the statements made in the original application are still true and accurate statements at the time the renewal application is filed. (this will be accomplished by filling out a new solicitor application obtained from the HCSO Records Unit and denoting any changes)
2. Applications for renewal must be made within 15 days after the expiration of the original permit. Applications for renewal made after that period shall be considered applications for a new permit.
3. Applicants and permittees shall immediately report any changes to any of the information reported in the application, to the Hanover County Sheriff's Office ASAP.

**\*\*NOTE:** Upon completion, please provide a reliable call back number for notification of the completion of the application process. Should you hear no feedback as to the status of your application within five working days, call the Sheriff's Office at 365-6110 for an update.



# HANOVER COUNTY

## SOLICITOR'S PERMIT APPLICATION



Applicant's Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Color Eyes: \_\_\_\_\_ Color Hair: \_\_\_\_\_

Present Temporary Address: \_\_\_\_\_ Room or Lot No.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Telephone: \_\_\_\_\_

Last Temporary Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Length of Stay: \_\_\_\_\_

Name of Current Employer or Company: \_\_\_\_\_ Present Job Title: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Previous Employment: \_\_\_\_\_

Address: \_\_\_\_\_ Job Title: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

List the kind of goods offered for sale or the type of service(s) to be performed:

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List the specific area(s) of Hanover that you will be working: \_\_\_\_\_

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**FOR HCSO OFFICE USE ONLY**  
 Check/ Money Order: **Paid** or **Not Paid**  
 Check/ Money Order #: \_\_\_\_\_  
 Initials: \_\_\_\_\_

**Fee:** \$20.00 non-refundable  
 Checks payable to Treasurer, Hanover County



**CRIMINAL RECORD REQUEST FORM**



PRINT ALL INFORMATION  
APPLICANT MUST FILL OUT COMPLETELY

\_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE NAME

\_\_\_\_\_  
ALIAS AND / OR NICKNAME

BORN \_\_\_\_\_  
MONTH DAY YEAR

\_\_\_\_\_  
PLACE OF BIRTH (CITY-TOWN-COUNTY) STATE SOCIAL SECURITY NO.

\_\_\_\_\_  
DRIVER'S LICENSE NUMBER STATE ISSUED

\_\_\_\_\_  
VEHICLE LICENSE NUMBER STATE

\_\_\_\_\_  
RACE SEX AGE HEIGHT FT. IN. WEIGHT

\_\_\_\_\_  
HAIR EYES COMPLEXION

\_\_\_\_\_  
HOME ADDRESS STREET CITY-TOWN-COUNTY-STATE ZIP CODE

\_\_\_\_\_  
PREVIOUS HOME ADDRESS STREET CITY-TOWN-COUNTY-STATE ZIP CODE

\_\_\_\_\_  
HOME PHONE NUMBER BUSINESS PHONE NUMBER

Name of Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

Current Address  
of Supervisor: \_\_\_\_\_ Room or Lot No.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Make of Vehicles  
Used: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

License No.: \_\_\_\_\_ State: \_\_\_\_\_ Is this vehicle registered in your name? \_\_\_\_\_

Name of Registered Owner: \_\_\_\_\_

Address Where Vehicle  
Currently Kept: \_\_\_\_\_

Company's I.D. Card No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you ever been convicted of a Felony? Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

Jurisdiction: \_\_\_\_\_ State: \_\_\_\_\_

Nature of Felony: \_\_\_\_\_

Have you ever been convicted of an offense reduced from a Felony? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: List date and jurisdiction: \_\_\_\_\_

Have you ever been convicted of any offense? Yes \_\_\_\_\_ No \_\_\_\_\_ Explain: \_\_\_\_\_

Anticipated length of stay in Hanover as a solicitor: \_\_\_\_\_

I certify that this information is true and accurate: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

Recommended for approval to County Administrator  
Major R. Allen Davidson for Colonel Dave R. Hines, Sheriff

Not Recommended

Recommended

Signature \_\_\_\_\_

Date \_\_\_\_\_



HANOVER COUNTY SHERIFF'S OFFICE



Authorization to Obtain Information

I authorize the Hanover County Sheriff's Office to perform a background investigation in connection with my application for this permit or license. This investigation may include information as to any criminal convictions, Division of Motor Vehicle records, and any other appropriate sources.

I authorize the release of any information that the Hanover County Sheriff's Office may request from the above sources.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date