Applying for Solicitor Permit for City of Darien

EMAIL APPLICATIONS TO DHATHAWAY@DARIENIL.GOV

- Application must be filled out in full including all signatures where requested. Signatures required in the highlighted sections - **MUST SIGN, DO NOT TYPE.**
- Letter submitted from the company, on company letterhead naming each solicitor, stating they will be soliciting on their behalf.
- Each solicitor is required to pay $73.00 (Cash, Check or Credit Card) QR Code included in this application packet.
- Copy of Government issued Identification with photo
- Once all required information is received, the City of Darien will submit for backround investigation. If something surfaces during investigation from outside the state of IL, additional fees may incur.
- Each individual solicitor or said representative will be notified if approved or denied. Each solicitor must be present to sign their permit once approved.
- Permit is valid for 30 days from date of pick up, if solicitor wishes to continue, the process stated above will need to be repeated.
- No solicitor shall start soliciting until approved permit is issued. Our residents are instructed to dial 911 if un-approved solicitor is at their door and an officer will arrive and fine the un-approved solicitor.

Contractor licenses are NOT solicitor licenses

App. No.:_____ Fee Paid $_____ Add. Fee $_____ Commercial ____ Non-Commercial ____

CITY OF DARIEN
SOLICITOR LICENSE APPLICATION

The following information must be completed in full in order to process application or license may be denied.

APPLICANT INFORMATION Date of Application: _____

Name:_____
Last First Middle Initial

Home Address:_____
Street Apt./Unit No.

_____
City State Zip Code

Daytime Phone: (____) _____ Date of Birth:_____ Age:_____
Area Code

Male☐ Female☐ Height_____ Weight_____ Hair _____ Eyes_____

Identifying Marks (Scars, Tattoos etc.) _____

S.S.#_____ Driver's Lic./State ID#_____ State: _____

Have you lived outside the State of Illinois in the past 7 years? Yes☐ No☐ If yes, additional background check fees may be charged.

PERSON, FIRM, CORPORATION, ASSOCIATION OR ORGANIZATION (Employer)

Name: _____

Address: _____
Street City State Zip Code

Phone Number: (____) _____ Length of Employment:_____

Description of materials or services: _____

Company Email Address: _____

Do you desire to be licensed to peddle/solicit from: Vehicle☐ Pushcart☐ Basket☐ Other☐?

Vehicle Year _____ Make/Model_____ Color_____

License Plate Number_____ State_____

Date of the most recent application for license under this Chapter or its predecessor: _____

Has a license issued to this applicant under this Chapter or its predecessor ever been revoked?

Yes ☐ No ☐ If yes, give date and reason: _____

Have you ever been convicted of a violation of any of the provisions of this Chapter, its predecessor, or any ordinance of any Illinois municipality, or any Illinois statue, regulating soliciting or peddling?

Yes ☐ No ☐ If yes, give date and reason: _____

Have you ever been convicted of a felony under the laws of the State of Illinois or any other State, or under Federal laws of the United States?

Yes ☐ No ☐ If yes, give date and charges of conviction: _____

I have attached the following to this application:

-Evidence of authorization to solicit or peddle for the organization represented:

Yes ☐ No ☐

-A copy of my Certificate of Registration under the Retailers' Occupation Tax Act (if subject to the Transient Merchant Act of 1987):

Yes ☐ No ☐

-Proof of compliance with the Solicitation for Charity Act (if applicable):

Yes ☐ No ☐

I swear or affirm that all the above information is true and correct. I further swear or affirm that I have read and will abide by the City of Darien's Solicitation Ordinance currently in effect and that I will pay in full required fees as outlined by this Chapter and will submit such other information or documentation as the City Clerk and/or Chief of Police may deem necessary to determine the identity of the applicant or to process the application. I understand that this license may be revoked for non-compliance with any of the above.

_____

Signature of Applicant

FOR OFFICE USE ONLY

Date received by Chief of Police: _____

Chief of Police Recommendation: Approved _____ Denied_____ Reason for Denial_____

Chief of Police Signature: _____

License Status: Approved _____ Denied _____ City Clerk's Signature: _____

Notes: _____**Date Issued:** _____

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION

City of Darien ("the Company") may obtain information about you for employment/volunteer or contractor purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your criminal history, social security verification, motor vehicle records ("driving records"), verification of your education (including transcripts), or other background checks.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you and to request a copy of your report. These searches will be conducted by CareerBuilder Employment Screening, LLC, 3800 Golf Road, Suite 120, Rolling Meadows, IL 60008, (866) 255-1852, www.careerbuilderscreening.com. The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports throughout the course of your assignment or employment to the extent permitted by law.

Signature: _____ **Date:** _____

[End of Document]

NOTE: YOU MUST RETURN THIS DOCUMENT

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the separate document entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand those documents. I hereby authorize the obtaining of "consumer reports" by the Company at any time after receipt of this authorization and throughout my assignment or employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, branch of the military, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **CareerBuilder Employment Screening, LLC, 3800 Golf Road, Suite 120, Rolling Meadows, IL 60008, (866) 255-1852,** www.careerbuilderscreening.com and/or the Company. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants, volunteers, contractors or employees only: Upon request, you will be informed whether or not a consumer report was requested by the Employer, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Employer by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law.
New York applicants, volunteers, contractors or employees only: By signing this form, you acknowledge and authorize the Employer to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.
Washington State applicants, volunteers, contractors or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.
Minnesota and Oklahoma applicants, volunteers, contractors or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. ☐

Signature: _____ **Date:** _____

[End of Document]

NOTE: YOU MUST RETURN THIS DOCUMENT

PLEASE PRINT NEATLY AND MAKE SURE THE PRINTING IS LEGIBLE

First Name: | Middle Name: | Last Name:

Maiden Name: | Date Changed:

Other last names used: | Date Changed:

Other last names used: | Date Changed:

Other last names used: | Date Changed:

List all cities and states where you have lived for the past 7 years - Attach additional sheet if necessary

	Street	City	County	State	ZIP	How Long?
Current:						
2:						
3:						
4:						

Present Phone Number (with area code): | Social Security Number:

Date of Birth* (MM/DD/YYYY): | Gender*

☐ Male ☐ Female

Driver's License Number: | Driver's License State:

*This information will be used for background screening purposes only and will not be used as hiring criteria.

[End of Document]

NOTE: YOU MUST RETURN THIS DOCUMENT

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

  In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	**CONTACT:**
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates. 1b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the Bureau:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act	 a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box. 1200 Minneapolis, MN 55480

c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F St, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-43557

allpaid®

PAYMENT DOES *NOT* GIVE YOU PERMISSION TO SOLICIT - WILL CONTACT YOU WHEN PERMIT IS READY (PROCESS COULD TAKE UP TO 2 WEEKS)

Make a Payment Here!

City of Darien

for Miscellaneous Payments

Please scan the QR code below to make a payment online for **PLC #a0071p**

DEBIT CARDS · VISA · AMERICAN EXPRESS · DISCOVER

APPROVAL #: _____

To scan, hold your smartphone camera so that the QR code appears in view and tap the link displayed.

