



VILLAGE OF BEACH PARK

11270 W. Wadsworth Road
Beach Park, IL 60099
847-746-1770 villageofbeachpark.com

Application for Certificate of Registration Solicitor / Peddler / Canvasser / Transient Merchant

Village Code:

Title 9, Chapter 40 - SOLICITOR, PEDDLER AND CANVASSER REGISTRATION

https://codelibrary.amlegal.com/codes/beachparkil/latest/beachpark_il/0-0-0-3932

Applicant Information:	
Name:	
Address:	
Previous Address:	
Email:	
Phone #:	Alt. Phone #:
Birthday: (MM/DD/YYYY)	Social Security #:
Driver's License/ID #:	State:
Have you previously been approved or denied as a solicitor by the Village? <input type="checkbox"/> Yes / <input type="checkbox"/> No (If yes, please explain.)	
Have you been convicted of a violation to the solicitor ordinance of this or any other municipality? <input type="checkbox"/> Yes / <input type="checkbox"/> No (If yes, please explain.)	
Have you been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes / <input type="checkbox"/> No (If yes, please explain.)	
Applicant shall submit a photograph or the Village may choose to take their own picture for ID.	

Description of Vehicle (used for activities)	
Make/Model:	
Color:	Year:
License Plate #:	State:



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Personal References: <i>(at least two references located in Illinois)</i>	
Name:	
Address:	
Phone:	
Relation:	
Name:	
Address:	
Phone:	
Relation:	

Employment Reference: <i>(for the past three years)</i>	
Name:	
Address:	
Phone:	
Start Date:	End Date:
Name:	
Address:	
Phone:	
Start Date:	End Date:
Name:	
Address:	
Phone:	
Start Date:	End Date:
*** Please use additional sheets of paper if there is more information to provide. ***	

Business Operations:
Name:
Description:
Address:
Days:
Hours:

Fees: \$25.00 for the first week and \$5.00 for every day after the first week.

Under penalties as provided by law pursuant to section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this application are true and correct, except as to matters therein stated to be on information and belief, and except as to such matters, the undersigned certifies as aforesaid that he/she verily believes the same to be true.

Printed Name of Applicant

Signature of Applicant

Date



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AUTHORIZATION FOR BACKGROUND CHECKS

I instruct and authorize the Village of Beach Park (“The Company”) to obtain a consumer report(s) (or background check report(s)) on me, including any investigative consumer reports and any consumer credit reports.* I also agree that a copy of this form is valid like the signed original.

The consumer reporting agency (CRA) ADP Screening and Selection Services, Inc. (ADP SASS) will conduct the background check and prepare the background check report for the Company. ADP SASS is located at 301 Remington Street, Fort Collins, CO, 80524, and can be reached by phone at 800-367-5933, or at www.adpselect.com.

I understand that, as allowed by applicable law, the Company may rely on this authorization to order additional background check reports, including investigative consumer reports and any consumer credit reports* (1) during my employment or time as a volunteer or independent contractor, as applicable, and (2) from any CRA other than ADP SASS without asking me for my authorization again. I understand the Company may order background check report(s) under my legal name and any other names I may have used.

I also instruct and authorize the following persons, agencies, and entities to disclose to ADP SASS and its agents all information about or concerning me, as allowed by law, including but not limited to: my past or present employers; learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; the military; credit bureaus; testing facilities; motor vehicle records agencies; all other private and public sector repositories of information; and any other person, organization, or agency with any information about or concerning me. As allowed by law, such disclosures may contain the following information pertaining to me: credit history*; public records; a Social Security number verification; driving records; military service; credentials/certifications; worker’s compensation injuries; and verification of prior employment and education.

***I understand that I am instructing and authorizing the Company to obtain a consumer credit report only to the extent permitted by law. If I reside or anticipate being employed in New York City, I understand that I am not being asked to authorize a consumer credit report by signing this document.**

By signing below, I understand that I am agreeing to the terms contained in this document.

Please print your full legal name:

Last Name _____ First _____ Middle _____

_____/_____/_____
Signature Today’s Date (Month/Day/Year)



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BACKGROUND CHECK INFORMATION

Please print:

Date: ____ / ____ / ____ (Month/Day/Year)		Race (optional field) check one or more: Other: _____ American Indian: Asian: Black: Hispanic: White:	
Name of Applicant (Last, First, Middle):			
For Identification Purposes Only:		Gender (check one) Female: Male:	
SSN: _____		Date of Birth: ____ / ____ / ____ (Month/Day/Year)	
Street Address:			
City:		State:	Zip:
E-Mail:			
Home phone:		Cell phone:	

Driver's License Number _____ State Issuing License _____

Enter Nickname(s) Used _____

Enter Any Other Names Used (including maiden names):

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

Addresses Within the Past Ten Years (use a separate sheet as needed)

Street Address:		
City:	State:	Zip:

From ____ / ____ / ____ (Month/Day/Year) To ____ / ____ / ____ (Month/Day/Year)

Street Address:		
City:	State:	Zip:

From ____ / ____ / ____ (Month/Day/Year) To ____ / ____ / ____ (Month/Day/Year)

All results will be kept confidential within the secure ADP portal.