



**City of Belle Isle**  
 1600 Nela Avenue, Belle Isle, FL 32809  
 Tel 407-851-7730 \* Fax 407-240-2222 \* [www.cityofbelleislefl.org](http://www.cityofbelleislefl.org)

## Solicitation Permit Application

**The issuance of a solicitation permit does not constitute an endorsement of the validity or reliability of any product, cause, solicitation, or solicitor which this permit allows. Please refer to Ordinance on [www.municode.com](http://www.municode.com).**

Application Date \_\_\_\_\_ ID # (issued by City) \_\_\_\_\_ Fee \_\_\_\_\_

Applicant Name		Home Address			City, State, Zip		
Business Name		Business Address			City, State, Zip		
Date of Birth	Hair Color	Race	Height	Weight	Sex	Eye Color	
Drivers License #		Vehicle Used (Year, Make, Model)			License Plate Tag Number		
If applicant is a minor: Name of supervisor		Supervisor's cell phone number			Supervisor's permit #		
Applicant telephone number				Business telephone number			
Nature of Activity (Product & Method of Delivery)							

Please **check** each statement that applies:

- Have you ever been arrested on any felony, misdemeanor (excluding traffic violation), or violation of any city ordinance.
- Were you convicted of the following felony, misdemeanor (excluding traffic violations), or violated the following city ordinance: \_\_\_\_\_ and was assessed the following penalty or punishment \_\_\_\_\_.
- I am required to obtain a "home solicitation sale" permit pursuant to s. 501.022, Florida Statutes.
- I am soliciting on behalf of a tax exempt organization.
- I understand that the Police Department will run a background check and have provided S.S.# \_\_\_\_\_.
- If applicant does not meet the criteria a refund will not be provided.

**I hereby affirm that the above information is true and correct and that I have read and agree to follow all of the requirements of the City of Belle Isle Ordinance No. 11-01. Please go to [www.municode.com](http://www.municode.com) to view or print Ordinance.**

\_\_\_\_\_  
 Print Name

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

\_\_\_\_\_  
 Approved: City Manager

\_\_\_\_\_  
 Date

**PLEASE ATTACH THE FOLLOWING:**

1. COPY OF DRIVER LICENSE OR STATE IDENTIFICATION CARD
2. IF APPLICABLE, COPY OF HOME SOLICITATION SALES PERMIT ISSUED PURSUANT TO S. 501.022, FLORIDA STATUTES.
3. IF APPLICABLE, COPY OF FLORIDA SALES TAX EXEMPTION CERTIFICATE
4. UPON ISSUANCE OF PERMIT A COLOR PHOTOGRAPH WILL BE TAKEN OF APPLICANT

**OFFICE USE ONLY:** \_\_\_\_\_ photograph \_\_\_\_\_ Drivers License or State ID Card \_\_\_\_\_ Home Solicitation Sale permit