



Solicitation Registration

City of Austin ♦ 500 4th Avenue NE

SECTION A. Agency Information			
Name of Agency or Organization:			
Street:	City:	State:	Zip:
Brief description of the nature of the business or solicitation and goods to be sold:			
Do you use a contract? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please attach a copy.			

SECTION B. Applicant Information	
Applicant Name:	
Local Address:	Local Phone Number:
Permanent Address:	Permanent Phone Number:
List other Minnesota cities where you have registered or applied for a solicitor's permit:	
Beginning Date	Ending Date:

SECTION C. Vehicle information			
Make/Model:	Color:	Year:	License Number:

I certify that the information provided on this form is accurate and complete.

SIGNATURE

DATE SIGNED