

OCEANPORT POLICE DEPARTMENT

P.O. BOX 370 OCEANPORT, NEW JERSEY 07757

MICHAEL P. KELLY

CHIEF OF POLICE



MICHAEL S. CHENOWETH

CAPTAIN

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APPLICATION FOR SOLICITOR'S PERMIT

READ THIS STATEMENT BEFORE COMPLETING THIS APPLICATION:

All questions must be answered truthfully and in full. If you have been arrested in the past, you must indicate that fact on this application. You must list ALL of your arrests separately without any omissions. **If additional space is needed, please attach additional sheets to this form. Failure to list ALL arrests, voluntary omissions and/or false information will result in the denial of a permit to solicit in the Borough of Oceanport.**

Permit Number: _____ Expiration Date: _____

Name: _____ Date Of Birth: _____

Social Security Number: _____ Driver's License # / State: _____

Sex: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Address: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Other Phone: _____

Reason For Soliciting: _____

Vehicle Registration / State: _____ Make: _____ Color: _____

Have you ever been arrested: Yes: _____ No: _____

If Yes, Provide details, including; Year, Reason, Location, Disposition: _____

All information provided is the true and accurate to the best of my knowledge.

Signature of Applicant

Date Signed

Interviewed By: _____ Application: Approved: _____ Denied: _____

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