



ALGONQUIN POLICE DEPARTMENT
APPLICATION FOR CERTIFICATE OF REGISTRATION
Complete Application for Each Solicitor -- (PLEASE PRINT)

1. Name (first, middle, last) _____

Address (residence) _____

How long at above residence? Years _____ Months _____

Social Security Number: _____

2. If at above residence less than three years, give previous address:

3. Date of Birth (Mo, Day, Year) _____

Valid Drivers License # _____ Issued by (State) _____

State Identification Card # _____ Issued by (State) _____

Copy attached (DL or State ID)

4. Applicant's physical description (for fingerprint processing and/or identification purposes)

HT _____ EYES _____ SEX _____ SKIN _____
WT _____ RACE _____ COUNTRY OF BIRTH _____ HAIR _____

FOID CARD Yes No FOID ID # _____

5. Business Name: _____

Business Address: _____

Length of employment: Years _____ Months _____

6. If employed less than 3 years, enter name and address of previous employer:

7. **FOR PROFIT:** Describe the nature of the solicitation, type of business, or attach handouts, which may assist in the review of this application. – OR –

NOT-FOR-PROFIT: Attach a copy of not-for-profit status. Describe the nature of the solicitation, type of business, or attach handouts that may assist in the review of this application.

8. Period of time requested for solicitation (list specific dates):

9. Date of the latest previous application for a Certificate under this Ordinance:

10. Has a Certificate of Registration issued to you under the Village of Algonquin's Ordinance ever been revoked?

Yes No

11. Have you ever been convicted of a violation of this ordinance or the ordinance of any other municipality regulating soliciting? Yes No

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

Yes No

NOT-FOR-PROFIT: I attest and/or certify that the

_____ (name of organization) is Not-for-Profit under the terms of the Village of Algonquin's Solicitors Ordinance, Chapter 34, and that the organization is in compliance with the Solicitation for Charity Act, 225 ILCS 460/0.1 et seq. Solicitors may be required to be fingerprinted, see "For Profit" which follows.

FOR PROFIT: The information I have provided in this Application concerning my background is true and correct. I understand that each participant in this solicitation must submit to fingerprinting 45 days in advance of the date(s) requested for the solicitation activity. I understand that there is \$44 fee for each set of fingerprints, and a \$25 per person per day fee for the permit to solicit.

ALL: I further understand that without a certificate of registration approved by the Chief of Police, a \$1,000 fine per occurrence could be levied upon my organization or me. I understand the following parameters of Soliciting in the Village of Algonquin: There is no solicitation on Sunday or on National or State Holidays. Dependent upon approved dates, Solicitation can only take place Monday through Friday from 9 a.m. to 8 p.m. and on Saturday from 9 a.m. to 6 p.m. If a "No Soliciting" sign is posted at the residence, solicitation is prohibited, and the solicitor will depart peacefully and immediately. I understand that the Chief of Police, pursuant to section 34.05 of the Village of Algonquin Municipal Code may revoke this Certificate. Each person who will be soliciting shall carry on his or her person a Certificate issued to that person by the Algonquin Police Department.

Signed this _____ day of _____, 20_____

_____ Signature of APPLICANT

_____ Organization (Print)

_____ Signature of Agent for Organization