



CITY OF LEBANON N.H.

## DOOR-TO-DOOR SOLICITATION

BUSINESS NAME:

CONTACT PERSON:

ADDRESS:

PHONE:

EMAIL:

### DETAILED INFORMATION

Name of Individual(s):

### *Date(s) of Solicitation*

From:

To:

### *Area(s) of Solicitation*

Locations:

### *Vehicle Information*

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

License Plate #: \_\_\_\_\_ Issuing State: \_\_\_\_\_

► **Please provide a copy of your Photo I.D. or Driver's License**

DATE RECEIVED:

Photo I.D. or Driver's License Provided

Information provided to Public Safety