



CITY OF LEBANON N.H.

DOOR-TO-DOOR SOLICITATION

Submit to: manager@lebanonnh.gov 603-448-4220

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
