

Denton Police Department
Individual Application for Solicitors or Itinerant Merchants Permit
City of Denton, Texas

Date of Application _____ Permit Number _____ PD- _____

Name of Applicant _____

Date of Birth _____ Race _____ Sex _____ SS # _____

Age _____ Height _____ Weight _____ Hair _____ Eyes _____

Drivers License Number _____ State _____

Address while in Denton _____ Phone _____

Home Address _____ Phone _____

Name of Company/Corporation represented _____ Phone _____

Address of Company/Corporation _____

Description of goods/services sold, solicited or displayed _____

Location where sales will occur _____

Vehicle Information:

Year _____ Make _____ Model _____ Color _____

License Number _____ State of Registration _____

This permit is requested for the dates of _____, until _____.

List all communities in which you have solicited within the past twelve (12) months and what company represented.

List all arrests within the past twelve (12) months, the date of arrest, the location of the arrest and the disposition of the arrest.

****This application must be accompanied by the \$10.00 permit fee. The fee must be in cash and in the correct amount.**

I, the undersigned, affirm that the information contained in this application is true and correct. I acknowledge that I have received a copy of the Solicitors and Itinerant Merchants Permit Information and Requirements.

Full Name of Applicant

Date

**DPS Computerized Criminal History (CCH) Verification
(AGENCY COPY)**

I, _____, acknowledge that a Computerized Criminal
APPLICANT or EMPLOYEE NAME (Please print)

History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. (This is not a consent form, but serves as information for the applicant.) Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is not allowed to discuss with me any CHRI obtained using the name and DOB method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

In order to complete the fingerprint process I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us /Crime Records/Review of Personal Criminal History](http://www.txdps.state.tx.us/CrimeRecords/ReviewofPersonalCriminalHistory) or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by this agency. Required for future DPS Audits)

Signature of Applicant or Employee (optional)

Date

Denton Police Department
Agency Name (Please print)

Agency Representative Name (Please print)

Signature of Agency Representative

Date

Please: Check and Initial each Applicable Space	
CCH Report Printed:	
YES _____	NO _____ initial
Purpose of CCH: _____	
Empl ___	Vol/Contractor ___ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
Retain in your files	