



CITY OF  
**CASTLE HILLS**

209 LEMONWOOD DRIVE • CASTLE HILLS, TEXAS 78213-2410 • (210) 342-2341 • FAX (210) 342-4525

**SOLICITOR PERMIT APPLICATION**

DATE \_\_\_\_\_

PERMIT NO. **SPB-**\_\_\_\_\_

**(Please Print Clearly)**

NAME \_\_\_\_\_

RACE \_\_\_\_\_ SEX \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

D.L.# \_\_\_\_\_ STATE \_\_\_\_\_

HAIR COLOR \_\_\_\_\_ EYE COLOR \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

Under the provision of the City Code of Castle Hills, Chapter 21, passed and approved by the City Council of the City of Castle Hills, Bexar County Texas, the above named individual representing:

(COMPANY REPRESENTING) \_\_\_\_\_

Is hereby granted permission to call upon, solicit, peddle or distribute in the City of Castle Hills between the hours of 9:00 a.m. to 5:00 p.m., Monday through Saturday only, for the purpose of soliciting:

(SERVICE SOLICITING) \_\_\_\_\_

When calling upon or soliciting by telephone, the solicitors will clearly state the nature of his/her business. Upon indication by any resident that they are not interested in the merchandise, books, magazines, services, etc. being offered, the bearer of the permit, or caller, will promptly leave the premises or terminate the discussion without argument or insistence. Complaint received against the above name person or organization will be deemed sufficient cause to revoke their permits. When soliciting door to door, solicitor will be required to wear the badge issued at time of purchase of permit. The badge must be returned to the City Office before 9:00 a.m. on the date following expiration for refund.

**FEES:**        \$ 5.00 per day per person  
                  \$ 12.50 per week per person  
                  \$ 30.00 per month per person  
                  \$150.00 per year per person

**\*Plus \$2.00 badge deposit refundable upon return of badge.**

*\*The bearer whose signature appears heron agrees to surrender badge the next working day upon expiration. Failure to do so will result in forfeiture of \$2.00 deposit and may disqualify bearer for future permits.*

**AFFIDAVIT**

I, \_\_\_\_\_, state under oath that all information contained herein is true and correct.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

**SWORN AND SUBSCRIBED** before me, the undersigned authority on this the \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for The State of Texas

THIS PERMIT EXPIRES ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_  
AT 5:00 P.M.