



# AYER POLICE DEPARTMENT



54Park Street • Ayer, Massachusetts 01432-1161  
Tel.(978) 772-8200 • Fax (978) 772-8202

William A. Murray  
Chief of Police

## Permit to Solicit Application

Include with application: \$5.00 fee and 2 passport size photos

Name(Last, First, Middle)				Date of Application	
DOB	Sex	SS#	Driver's License# and State	State Transient Vendor# (include copy)	
Home Address (Street, City, State, Zip)				Telephone	
Local Address (Street, City, State, Zip- if same as Home write Same)				Telephone	
<b>If MV</b> used: Registration & State		Make	Model	Year	Color
Company Name		Company Telephone		Supervisors Name	
Company Address (Street, City, State, Zip)					
Nature of product or service you plan to sell and method of operation (e.g. door-to-door, street vendor, etc.):					
List ANY criminal offenses in Massachusetts or any other state. Failure to disclose criminal history is cause for denial of permit. Attach additional pages if necessary.					
Offense	Court Location		Date	Disposition	
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By signing below you declare that the facts and information on this application are complete and true. Fraud, misrepresentation or false statements are cause for denial/revocation.					
No permit shall be issued until three (3) Business days after application therefore is made in writing to the Police Department. All permits are to be picked up at the Ayer Police Department by the permittee only. The permittee must show a state issued picture identification and a copy of his/her state transient vendor license at time of pick-up.					
_____ Signature				_____ Date	
Department use only:					
Received By	Date Received	Approved (circle one) y                      N: Reason			
Chief Signature				Date	