

Give names of all subcontractors or companies hired to perform solicitation:

Name _____ Name _____
Name _____ Name _____

Outline method to be used in conducting Solicitation/Sale: _____

When will Solicitation/Sale Start? _____ Will End? _____

Estimated cost of Solicitation/Sale: _____

Will there be any telephone solicitation? Yes No

Give following information: Wage, fee, commission, expenses or emoluments to be expended, paid to, or retained by any person connected with solicitation:

Name _____ Address _____ Fees, etc. _____
Name _____ Address _____ Fees, etc. _____

Attach financial statement for last preceding fiscal year of any funds collected for charitable purposes by applicant. Show amount so raised, cost of raising such amount, and final distribution thereof.

Outline fully the character and extent of the charitable work being done by applicant within City of GLENDALE: _____

I Certify that I have read 5.40.060 - 5.40.080 of the Municipal Code of the City of Glendale and know the contents thereof, and that if granted a permit pursuant to said Code I will comply with all the conditions thereof. A permit, if granted, will not be used or represented as an endorsement by the City of Glendale or by any department or office thereof.

I will also furnish such other information as may be reasonably required by the City Manager in order for him to determine the kind and character of the proposed solicitation or sale.

STATE OF CALIFORNIA) SS Signed _____
COUNTY OF LOS ANGELES) By _____

_____, being duly sworn, deposes and says that he/she is the _____, that he/she has read the foregoing application and knows the contents thereof and that the same is true of his/her own knowledge.

Subscribed and sworn to before me this _____ day of _____, 19____ (Signed) _____

Notary Public or other person authorized to administer oaths.

Approved _____ Denied _____
Permit No. _____ Date _____

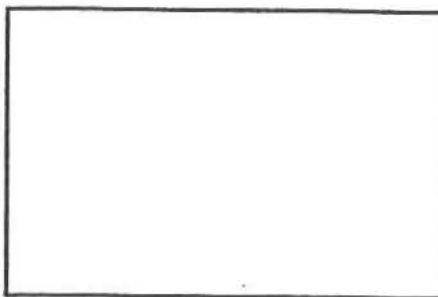
Photo

Name _____

Address _____

Phone No. _____

Driver's License No. _____



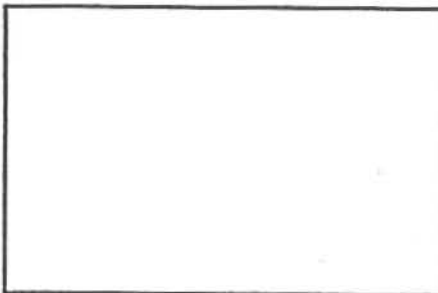
Photo

Name _____

Address _____

Phone No. _____

Driver's License No. _____



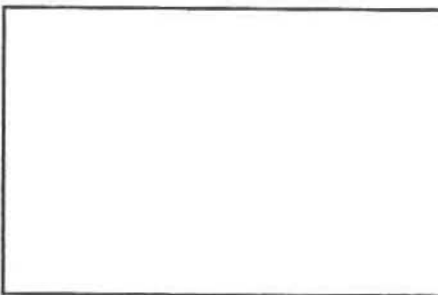
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Name _____

Address _____

Phone No. _____

Driver's License No. _____



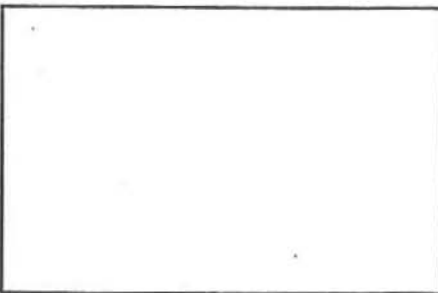
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Name _____

Address _____

Phone No. _____

Driver's License No. _____



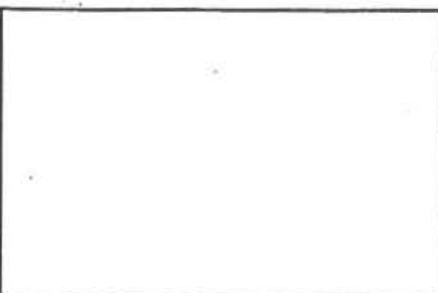
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Name _____

Address _____

Phone No. _____

Driver's License No. _____





818-548-2090

CITY OF GLENDALE PERSONAL AFFIDAVIT IN SUPPORT OF APPLICATION

PLEASE PRINT OR TYPE

DATE: _____

FULL NAME _____
Last First Middle

RESIDENCE _____
Street City State/Zip
HOME PHONE () _____

BUSINESS _____
Street City State/Zip
BUSINESS PHONE () _____

DESCRIPTION _____
Date of Birth Sex Hgt. Wgt. Hair Color Eye Color

DRIVER'S LICENSE NO. _____ SOCIAL SECURITY _____

List any and all other names used for legal identification:

Have you ever been convicted of a felony and/or misdemeanor? If answer is "YES" list the dates, specify the conviction, and identify the court and case number.

I HAVE READ AND UNDERSTAND THE PROVISIONS, RULES AND REGULATIONS OF THE CITY OF GLENDALE, CALIFORNIA AND THE MUNICIPAL CODE GOVERNING THE TYPE OF LICENSE OR PERMIT FOR WHICH I AM APPLYING.

Organization: _____

Signed: _____

Title: _____