



The City of Weldon Spring
 5401 Independence Rd.
 Weldon Spring, MO 63304
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 cityclerk@weldonspring.org

Application for Solicitor's License

Reference Ordinance# 19-10

Instructions: Please submit one (1) application per applicant. Approved licenses are only good for seven (7) days. Each applicant will need a copy of their identification, will need to submit their current contact information, new applicants are subject to the State of Missouri Highway Patrol criminal background check. Solicitation can occur from 8:00 a.m. to sunset.

New Applicant (\$25.00 Fee) Renewal (\$12.00/application)

Solicitor Name: _____

Solicitor Driver License#: _____

Email-address: _____

Day Time Phone: (_____) _____ Emergency Phone: (_____) _____

Home Address: _____

Name of Business: _____

Owner/Manager: _____

Email-address: _____

Day Time Phone: (_____) _____

Business Address: _____

Nature of Business: _____

Merchant/Retail Service Distributor Other: _____

Brief Description of Business: _____

*Federal Tax I.D.#: _____

*Missouri Sales Tax I.D. #: _____

*Tax Exempt #: _____

I, _____ hereby make application for a solicitor's license for a period beginning (date) ___ / ___ / ___ and ending seven (7) days later. The below signed confirms the ascribed information is correct and authorizes a criminal background check by the State of Missouri Highway Patrol.

Signature: _____ Date submitted: _____

* not needed for application

For office use:

Approved Denied

City Clerk Signature: _____ Date: _____

Reason for Denial: _____

