

TOWN OF WESTPORT

DEPARTMENT OF POLICE



818 Main Road •Westport,MA 02790-4311 Tel. 508-636-1122 • Fax 508-636-4108 • CJIS:WST • NCIC:MA0032000

KEITH A. PELLETIER - Chief of Police

APPLICATION FOR CERTIFICATE OF REGISTRATION - SOLICITOR

INSTRUCTIONS FOR ALL APPLICANTS:

- 1) Application for a certificate of registration shall be made upon a form provided by the Police Department along with a nonrefundable application fee of \$25.
- 2) An authorized representative of the sponsoring organization shall apply to the Chief of Police or his/her designee either in person or by mail. All statements on the application or in connection therewith shall be under oath. The applicant shall provide all information requested on the application
- 3) A photograph or an acceptable photocopy of a photograph of each representative of the sponsoring organization who will be soliciting or canvassing in the Town shall be attached to the application. For example, government issued driver's license or government issued id sufficient for verification purposes.
- 4) No certificate of registration shall be issued to any person, or to any organization having an officer or director, who was convicted of commission of a felony, either state or federal, within five years of the date of the application, nor to any organization or person whose certificate of registration has previously been revoked.
- 5) Fully completed applications for certificates shall be acted upon within five business days of receipt. The Chief of Police shall cause to be kept accurate records of every application received together with all other information and data pertinent thereto and all of certificates of registration issued under this section and of all denials.
- 6) Upon approval of an application, each solicitor or canvasser shall be issued a certificate of registration to carry upon his/her person at all times while soliciting or canvassing in the Town and to display the

certificate whenever asked by any police officer or any person solicited.

Bylaws - Town of Westport Article LXI Section 6101. Door to Door Solicitors

No person unless otherwise authorized shall go from place to place within the Town selling or bartering or carrying for sale or barter or exposing therefore or taking orders therefore any goods, wares, or merchandise, nor shall any person go from place to place within the Town begging or soliciting alms or contributions for any person, cause or organization, either on foot or from any animal or vehicle without having first recorded his name and address with the Chief of Police and furnished such other information as may be requested of him.

The Chief of Police shall thereupon if satisfied with the honesty of the applicant, issue a permit for a period not exceeding twelve months, which must be shown on request, and shall state that said person has duly registered and is entitled to go from place to place within the Town for the purpose specified.

The Chief of Police may, however, authorize the director of any religious organization within the Town to solicit such contributions, etc, without having each solicitor under his direction registered.

TOWN OF WESTPORT DEPARTMENT OF POLICE

APPLICATION FOR CERTIFICATE OF REGISTRATION – SOLICITOR

1) SPONSORING ORGANIZA	TION:
NAME:	
ADDRESS:	
PHONE:	STATE AND/OR FEDERAL TAX ID #:
List all Officers & Directors (Use	e separate sheet if necessary):
Name:	Address:
Description sufficient for identifi organization will engage:	cation of the subject matter of the soliciting or canvassing in which the
Period of time for which the certi	ficate is applied (1 YEAR MAXIMUM):
Date of the most recent previous	application for a certificate under this section:
or representative of the organizat	tificate of registration issued, to the organization or to any officer, director ion by any city or Town and the reasons therefore (use separate sheet if

Names of the three communities where the 123	
Proposed dates, hours, and method of opera	
24 Hour contact number for Organization's	Representative: ()
	VN OF WESTPORT RTMENT OF POLICE
2) APPLICANT/SOLICITOR:	
Name:	
Date of Birth:So	ocial Security #:
Residential Address:	
How long at this address?:	Residential Phone #: ()
Business Address:	
Business Phone #: ()	
I hereby swear or affirm under the pains and form are true and accurate to the best of my	d penalties of perjury that all answers provided by me on this knowledge and belief:
Authorized Sponsoring Organization/Co	mpany Representative:
Name Printed:	
Signature:	Date:
Applicant/Solicitor:	
Name Printed:	
Signature:	Date:

NOTE: SUITABLE PHOTO OF APPLICANT MUST ACCOMPANY THIS APPLICATION.

For example, government issued driver's license or government issued id sufficient for verification purposes.