



**CITY OF HIGHLAND**  
**APPLICATION FOR PEDDLING/SOLICITING**

_____ APPLICATION	<b>FEE: \$ 165.00</b>
_____ LIVE SCAN	<b>FEE: \$ 34.00</b> (per person)
_____ SB 1186	<b>FEE: \$ 1.00</b>
	<b>TOTAL: \$ 200.00</b>

Application is hereby made for a City of Highland license to engage in the business of peddling goods, wares, merchandise, or of soliciting orders for goods or services for repair or improvement of real property exceeding \$25.00 in cost or value, within the City of Highland, pursuant to the provisions of Highland Municipal Code 5.04.340 and 5.04.350.

Requirements: \_\_\_\_\_ Current California Identification  
\_\_\_\_\_ Live Scan- Each driver must apply for Live Scan Fingerprints  
\*Call Highland Police Dept. to schedule appointment

**Section 1**

Applicant's legal name, home address, and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home phone number Cell phone number

If employed, name of employer and complete address and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Business phone number Business fax number

**Section 2**

Brief description of the nature of the business including goods or services being sold:

\_\_\_\_\_  
\_\_\_\_\_

Specific locations and times of day applicant intends to peddle/solicited goods or services:

\_\_\_\_\_  
\_\_\_\_\_

If vehicle is used, give a description of vehicle including plate number and markings or advertisement

\_\_\_\_\_  
\_\_\_\_\_

Place where goods or property proposed to be sold are manufactured or produced and where these goods are located at the time the application is filed and proposed method of delivery?

\_\_\_\_\_  
\_\_\_\_\_

Section 3

*This page should be filled out separately for each person working. Live scan fees per person also required.*

Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Weight: \_\_\_\_\_

Height: \_\_\_\_\_

Section 4

\_\_\_\_\_ Social Security number

\_\_\_\_\_ Nicknames or aliases currently or previously used

\_\_\_\_\_ Place of Birth

Do you have a permit to carry a concealed weapon?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

If yes, give date and place of issuance of permit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section 5

List all criminal convictions, including offense, date, and sentences. \*Omit traffic and parking offenses

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you required to register as a sex offender under Penal Code Section 290?

Yes \_\_\_\_\_

No \_\_\_\_\_

If yes, give details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section 6

I hereby apply for one of the following exemptions and have submitted valid proof:

\_\_\_\_\_ Disability

\_\_\_\_\_ Under 18- Parent permission required

I declare under penalty of property, by signing as (one of) the owner(s), principal officer(s) listed below, that this application, including attachments, has been examined by me, and to the best of my knowledge believe to be true, accurate, and complete of all facts. I further certify that the above business will be conducted in compliance with the applicable provisions of the City of Highland Municipal Codes and Ordinances including state and federal laws. In addition, I assume responsibility to reapply for this business license on an annual basis and pay the license fees on time. I understand that I may have the business license revoked due to non-compliance of the conditions set forth by the City of Highland. I also agree to notify the City of Highland of any and all changes in business status relating to this application. As a courtesy we will send you a reapply notice. If you do not receive the notice, it is your responsibility to reapply by the expiration date.

\_\_\_\_\_ Applicant Signature

\_\_\_\_\_ Date

**HIGHLAND POLICE DEPARTMENT NOTES:**

I have investigated this application and recommend it be :

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied

Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Detective Signature: \_\_\_\_\_

Date: \_\_\_\_\_