



City of Pilot Point Building & Permits

Solicitor Permit Application

Applicant Name		Application Date
Applicant's Address		
Email Address		
Driver's License Number	Driver's License State	Date of Birth
Company Information		
Company Name		
Company Website Address		
Company Address	Phone Number	
Email Address		
Type of goods sold		

Applicant Signature _____ Date _____

☐ Approved ☐ Denied

Reviewed By _____ Date _____