

**SOLICITATION APPLICATION
FOR BENEFIT**

- (1.) Applicant's Name _____
- (2.) Birth Date _____ SSN # _____ Phone No. _____
- (3.) Home Address _____
- (4.) Drivers License No. _____ State _____
- (5.) Vehicle Make _____ Type _____ Color _____
License Plate No. _____ State Registration _____
- (6.) Name of person benefit is being held for _____
- (7.) Purpose of benefit _____
- (8.) Place benefit is being held _____
Date _____
Contact Person _____ Phone No. _____
- (9.) Have you been convicted of any crime, misdemeanor? _____
If so, explain _____
- (10.) List two references:
- | | |
|------|-----------|
| Name | Phone No. |
| Name | Phone No. |

This permit will expire on the day of the benefit.

Applicant hereby solemnly swears that each and every statement in the above application is true and correct, and agrees that if any statement therein is false, the permit issued thereto may be revoked.

This _____ day of _____, 20____.

Signature of Applicant

Verification of Benefit _____

___ Approved

___ Disapproved

Recorder