



**Application for Canvassers Permit
Borough of Sea Girt
321 Baltimore Boulevard
Sea Girt, NJ 08750
732-449-9433**



Individual who is conducting the canvassing:

Name: _____

Address: _____

Social Security Number or Driver's License Number: _____

Telephone Number: _____

Purpose for which canvassing will be conducted: _____

Name, Address and phone number of person(s) in direct charge of canvassers and canvassing:

OR

Organization or Business for whom canvassing is being conducted:

Name: _____

Address: _____

Telephone Number: _____

Purpose for which canvassing will be conducted: _____

Name, Address and phone number of person(s) in direct charge of canvassers and canvassing:

Canvassers:

Name

Address

Telephone

(Please attached separate listing if more space is needed for canvassers)

Method to be used to conduct canvassing: _____

Time & Date canvassing will commence: _____

Ending/Termination date for canvassing: _____

A statement as to whether or not the applicant or any person proposed to engage in the licensed activity has been convicted of any crime, misdemeanor or violation of any municipal ordinance, other than traffic violations, the nature of the offense and the punishment or penalty assessed therefore.

Signature of applicant or
person applying on behalf of organization:

Date:

Duration of Permit (Ord. 218): Permit shall not exceed 15 days for date of issuance and is only in effect between 9:00am – 8:00pm.

Official Use – Do not write below

Date Received: _____

Signature: _____

Payment Received - \$15.00

Statement Received:

Photos Received:

Permit Expiration Date: _____

Approved:

Denied: