



**Village of Shawnee Hills
Application for Vendor or
Solicitor Permit**

Fee: _____

Date: _____

Name of Applicant: _____

Address: _____

Phone: _____

Email: _____

Business Name: _____

Address: _____

Nature of Business: _____

Expected Length of Time in the Village: _____

Number of Persons Involved: _____

Fee shall be collected upon submission of this application
Identification must be provided for all persons involved.

Signature of Applicant

Approved

Date

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