MONROE POLICE DEPARTMENT APPLICATION FOR VENDOR

Permit No		Case No				
Permit Fee:						
Name(Last)	(First)	(Mid	dla)			
(Last)	(FIISt)	(IVIIQ	(Middle)			
Maiden or Other Name	Social	Social Security No.				
Address		Phone No ity/Town) (State) (Zip)				
(No.) (Street)	(City/Town) (State) (Zi	p)				
Local Address if Above Out of S	State					
	(No.) (Street)	(City/Town)	(State) (Zip)			
Local or Mobile Phone No						
Male Female Heig Place of Birth Scars and Marks	Date of Birth	Citizenship Y	Yes No			
Scars and Warks						
Drivers License No./State of Issu	iance					
Vehicle Model C	Color Year	Reg. No	State			
Name of Company or Organizat	ion					
Address		Phone No				
Nature of Business/Product						
Occupation	Have you Filed for A _I	oplication Before? Y	/es No			
	If Yes when?					

Have you ev details below		cted for any violatio	on of any law	? Yes No	. If Yes, fill in
<u>Date</u> <u>Place</u>		Location of Court		<u>Offense</u>	<u>Disposition</u>
Sionature			Date		
					_
For Office U					
Connecticut	State Sales Ta	x Permit No	(Copy	attached)	
Criminal History Check:	Date				
	Finding				
APPROVED	D/DENIED: _	Chief of Police		Date	