



CITY OF KENT, OHIO

CITY MANAGER'S OFFICE
215 E. Summit Street, Kent, OH 44240
P 330-676-7500 F 330-678-8033

EXEMPTION FORM
Kent Codified Ordinance, Chapter 745, Peddlers and Solicitors

NAME: _____

PERMANENT ADDRESS: _____

LOCAL ADDRESS: _____

BRIEF DESCRIPTION OF NATURE OF BUSINESS, REASON FOR DOOR-TO-DOOR CANVASSING:

LENGTH OF TIME YOU PLAN TO DO BUSINESS IN THE KENT AREA:

FROM _____ TO _____

NAME OF EMPLOYER/SPONSOR: _____

ADDRESS OF EMPLOYER/SPONSOR: _____

EMPLOYER PHONE NO. _____ APPLICANT PHONE NO. _____

DESCRIPTION OF VEHICLE TO BE USED: MAKE: _____ MODEL: _____

COLOR: _____ LICENSE NO. _____ STATE: _____

FOR MANAGER'S OFFICE ONLY

DATE: _____

DOES APPLICANT/COMPANY NEED A SOLICITOR'S PERMIT? _____

REASON FOR EXEMPTION _____

Cc: Police Chief
Dispatch
City Manager File