

Lynn Police Department

103 S. Main Street

P.O. Box 65

Lynn, Indiana 47355

765-874-1225--Office

765-874-2916--Fax

Bradley R. Fisher
Marshal



Travis C. Jones
Deputy Marshal



Solicitor Information

(Separate page required for each individual solicitor)

Name: LAST: <input type="text"/> FIRST: <input type="text"/> MI: <input type="text"/>			
Street Address: <input type="text"/>			
City: <input type="text"/>		State: <input type="text"/> Zip: <input type="text"/>	
Work #: <input type="text"/>		Home #: <input type="text"/>	Male: <input type="checkbox"/> Female: <input type="checkbox"/>
Age: <input type="text"/>	If older than 14 but less than 18, please attach Indiana Work Permit in compliance with Indiana Code 20-8.1-4		
Height <input type="text"/>	Weight: <input type="text"/>	SSN: <input type="text"/>	DOB: <input type="text"/> / <input type="text"/> / <input type="text"/>
Place of Birth (include city & state): <input type="text"/>			Hair Color: <input type="text"/>
Race: <input type="text"/>			
Indiana Residency: From: <input type="text"/> To: <input type="text"/>			
ARREST RECORD (List all arrests and convictions)			
Have you ever been charged or convicted of a criminal offense?		Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
Date: <input type="text"/>	Offense: <input type="text"/>	Arresting Agency: <input type="text"/>	
Date: <input type="text"/>	Offense: <input type="text"/>	Arresting Agency: <input type="text"/>	
DRIVERS LICENSE INFORMATION			
Current Driver's License Number: <input type="text"/>		D.L. State: <input type="text"/>	
Restrictions on Current Driver's License: <input type="text"/>		Expiration Date: <input type="text"/>	

Signatures

I affirm under the penalties of perjury that the foregoing representations are true to the best of my knowledge, information and belief, this _____ day of _____, 20____.

Signature of Applicant

Please Print Name

Notice: If there are any falsifications on this application, the license will be denied. If, after your license is issued, we receive complaints of rudeness, forcible tactics, refusal to leave or other undesirable behavior, your license will be revoked.

Each licensee shall be restricted to conducting activities to the following hours:

10am. to 7pm. NO SUNDAY DOOR TO DOOR SALES

Recommendation: <input type="text"/>	Approved: <input type="checkbox"/>	Denied: <input type="checkbox"/>
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Marshal or Designee

Date