

GOWANDA POLICE DEPARTMENT

VILLAGE OF GOWANDA
27 East Main Street
Gowanda, New York 14070



(716) 532-2020
Fax (716) 532-3777

Application for Solicitors Permit

Name of Applicant _____ DOB _____

Address _____

Organization Represented _____

Address _____

Items to be solicited _____

Hours of soliciting _____

Names of solicitors

1. _____ DOB _____ Address _____

2. _____ DOB _____ Address _____

3. _____ DOB _____ Address _____

4. _____ DOB _____ Address _____

5. _____ DOB _____ Address _____

6. _____ DOB _____ Address _____

Method of Distribution _____

Vehicle Used yes _____ no _____

Make _____ Color _____ plate# _____

Application Approved yes _____ no _____

Reason _____

Date _____ Gowanda Police Dept. _____