

OFFICE USE ONLY
PERMIT NUMBER: _____
DATE: _____

PRINCIPAL SOLICITING PERMIT APPLICATION
CITY OF FARMINGTON
P.O. Box 150, Farmington, AR 72730

Please fill out the following information to apply for a principal soliciting permit. Your application will be given to the City Business Manager for review.

Business Name: _____

Type of Organization: _____

Business Address: _____

City _____ State _____ Zip _____

Contact Name: _____

Mailing Address: _____

City _____ State _____ Zip _____

Business Phone: _____

Nature of products/services: _____

Proposed method of operation _____

List of persons who will solicit in the city on behalf of business:

Signature of Applicant

Total Due for Permit \$40.00

Signature of City Business Manager