

CITY OF LANCASTER

Building & Zoning Department
P. O. Box 1149 216 S. Catawba Street
Lancaster, SC 29721
(803) 283-4253



SOLICITATION APPLICATION/PERMIT

Name of Firm: _____ Date(s) of Solicitation: _____

Business Address: _____

City & State: _____

Type of Business: _____

Auto Tag #: _____ Driver's License #: _____

Name of Representative: _____

Address of Representative: _____

City & State: _____

Conditions under which permit is issued:

- Any contract signed by any resident of this City can and will be canceled with ten (10) days written notice to the above named firm or its representative.
- This firm will agree that they are willing for the City of Lancaster to publish their method of operation in the Lancaster News.
- The manager and personnel of the above named firm have acknowledged that they fully understand that ANY complaints, not handled to the satisfaction of the city office, will cause this permit to be null and void and surrender it to the City Administrator.
- That the above named firm fully understand that their operation will be carefully monitored and that any questionable practice will subject them to the immediate cancellation of this point and once canceled, this permit cannot be renewed.
- THIS PERMIT APPLIES TO SOLICITATION ONLY ON PUBLIC RIGHT-OF-WAYS AND DOES NOT APPLY TO SOLICITATION WITHIN/OR INSIDE A PRIVATE CONCERN WITHOUT THE EXPRESSED PRIOR APPROVAL OF THE OWNER/MANAGER OF THE BUSINESS.

The contents of this permit have been read and are fully understood and accepted by the undersigned who is the responsible party and so authorized to sign this agreement.

Name: _____

Title: _____

Approved by City of Lancaster on this _____ day of _____, 20_____.

Chief of Police: _____