



TOWN OF ORANGE

6 PROSPECT STREET • ORANGE • MASSACHUSETTS • 01364

APPLICATION CERTIFICATION OF REGISTRATION TO SOLICIT

DATE: _____

FEE: \$25.00

APPLICANT NAME AND ADDRESS:

BUSINESS NAME AND ADDRESS:

PURPOSE OF SOLICITATION:

PERIOD OF TIME CERTIFICATE IS DESIRED (not to exceed 12 months):

Start Date: _____ End Date: _____

DATE OF LATEST PREVIOUS APPLICATION (if applicable): _____

HAS A CERTIFICATE OF REGISTRATION ISSUED TO THE APPLICANT UNDER THIS
BY-LAW EVER BEEN REVOKED? _____

NAME OF MAGAZINES, BOOKS OR JOURNALS REPRESENTED, IF ANY:

PROPOSED METHOD OF OPERATION:

I certify that I have stated all information truthfully to the best of my knowledge. Signed under the penalties of perjury.

Signature: _____ Date: _____