



**Peddling & Soliciting
Certification of Understanding**

Please email completed form to permits@lexsc.com

Certify you understand the below statements by **initialing** each.

I understand that:

_____ A SLED background check must be submitted for each person listed on this application. (You can go to www.sled.sc.gov to do the online background check.)

_____ The \$35.45 zoning fee is to be paid at time of submittal before my application can be reviewed.

_____ It will take at least 10 business days to process my application and I am not to solicit/peddle until I receive documentation from the Town that my application has been approved.

_____ my application is not complete until I provide a schedule with date(s), time(s) and location(s) in Town for my intended peddling & soliciting.

_____ peddling or soliciting that occurs outside of the schedule or area(s) I have provided is prohibited.

_____ I must keep the soliciting/peddling approval letter issued to me by the Town of Lexington on my person at all times and produce it to police officer(s) if requested.

_____ I cannot stand on or adjacent to a street to solicit from occupants of vehicles.
(exception SECT 3)

_____ I cannot set up road blocks or impede traffic in any way and only solicit from public areas designated on my permit.

_____ I can only solicit/peddle between the hours of 10:00 AM and 8:00 PM local time.

_____ I cannot enter property displaying a sign stating "no soliciting" or words of similar effect or refuse to leave property after being requested to do so by owner or occupant.

_____ I will be given a list of subdivisions that have posted "no soliciting" signs at their entrances and will not be allowed to solicit/peddle in those neighborhoods at all.

_____ I will not be prohibited to solicit/peddle on private property if I am invited to do so by the owner and if Town requirements are adhered to.

_____ any others soliciting/peddling by me must be registered. (See application)

_____ any vehicles used while soliciting/peddling must be registered. (See application)

_____ if I solicit/peddle on the premises of a place of business, I will provide documentation from the owner or owner's designee granting me permission to do so.

_____ I shall not solicit/peddle after the specified time period on my permit has passed.

_____ I must comply with the Town's ordinances relating to business licenses, codes, and any other regulations.

_____ this permit will expire after 6 months from the date issued.



Peddlers License Application

For any person or group wanting to sell or solicit door-to-door or at a designated location within Town of Lexington limits.

APPLICANT INFORMATION

NAME: _____

ADDRESS: _____

TELEPHONE: _____ DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

DRIVER'S LICENSE: STATE: _____ NUMBER: _____

VEHICLE: MAKE/MODEL: _____ COLOR: _____ YEAR: _____

COMPANY / FIRM / ORGANIZATION INFORMATION

NAME: _____

ADDRESS: _____

TELEPHONE: _____

CONTACT PERSON: _____

*On a separate sheet of paper. Please provide a schedule of locations within town limits that each person will be, and the times that this person will be in that location. (i.e.- John Doe will be in Barr Lake on Monday's and Wednesday's from Noon – 2pm)



ADDITIONAL PARTICIPANTS IN APPLICANT'S GROUP

NAME: _____

ADDRESS: _____

TELEPHONE: _____ DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

DRIVER'S LICENSE: STATE: _____ NUMBER: _____

VEHICLE: MAKE/MODEL: _____ COLOR: _____ YEAR: _____

I have read, understand, and promise to uphold my responsibilities according to the "Peddling & Soliciting Certification of Understanding" or risk the license to be revoked for the entire group.

X _____

NAME: _____

ADDRESS: _____

TELEPHONE: _____ DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

DRIVER'S LICENSE: STATE: _____ NUMBER: _____

VEHICLE: MAKE/MODEL: _____ COLOR: _____ YEAR: _____

I have read, understand, and promise to uphold my responsibilities according to the "Peddling & Soliciting Certification of Understanding" or risk the license to be revoked for the entire group.

X _____