



# CITY OF TRENTON

## HIGHWAY SOLICITATION APPLICATION FORM

Today's date: \_\_\_\_\_

1. Name and address of organization:

---

---

2. Person representing organization:

---

3. Phone number of person representing organization:

---

4. Purpose of solicitation:

---

5. Date(s) of solicitation: \_\_\_\_\_ Time (s) \_\_\_\_\_

6. Location of solicitation: \_\_\_\_\_

7. Period of time applied for: \_\_\_\_\_ days

8. Number of persons involved in solicitation: \_\_\_\_\_

9. Approximate date of previous application for certificate: \_\_\_\_\_

10. Is the organization registered with the Illinois Attorney General as a "charitable organization"? \_\_\_\_\_

11. Additional information: \_\_\_\_\_

---

---

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Fee paid (if applicable) \_\_\_\_\_