Michele Maxwell

CLERK OF THE CIRCUIT COURT & COMPTROLLER
SECOND JUDICIAL CIRCUIT
FRANKLIN COUNTY, FLORIDA

OFFICIAL RECORDS
33 MARKET STREEET
APALACHICOLA, FL 32320

TELEPHONE # (850)653-8861
EXT. 109 OR 104

HOME SOLICITATION PERMIT APPLICATION
FRANKLIN COUNTY, FLORIDA

Application # (Clerk's Use)	
Name – First Middle Last	
Date of Birth	
Race	
Sex	
Permanent Residence Address	
Local Residence Address	
(Local business address is not sufficient)	
Home Telephone Number	
Cell Phone Number	
Business Telephone Number	
Employer's Name	
Employer's Address	

Have you ever been convicted, pled guilty, or pled nolo contendere to any crime? ☐ Yes ☐ No
If yes, state the nature of the offense(s), place of offense(s), and the punishment or penalty assessed for each offense. (Attach additional pages if needed.)

I have all currently required county or municipal occupational licenses. I understand this permit can or will be revoked if I am convicted of, plead guilty or nolo contendere to, a crime against the laws of this state or any other state or the United States, involving moral turpitude, fraudulent or dishonest dealing, or the illegal use or sale of a controlled substance, or am convicted of, or enter a plea of guilty or nolo contendere to, a violation of any of the provisions of Sec. 501.021 – 501.055 F.S. I solemnly swear that all of the above statements are true and correct.

_____

Applicant's Signature

STATE OF FLORIDA
COUNTY OF FRANKLIN

The foregoing instrument was acknowledged before me on this ____ day of _____, _____, by _____, who is ☐ personally known to me or ☐ who has produced _____ as identification and who ☐ did ☐ did not take an oath.

_____

Notary Public Signature

_____

Notary Public Printed Name