

**BRENT LAMBERT**  
Mayor

**JACKY CAGLE**  
Councilmember

**BRIAN WILLIAMS**  
Councilmember



**LARRY SEWELL**  
Vice Mayor

**ESTHER HELTON**  
Councilmember

**J. SCOTT MILLER**  
City Manager

# City of East Ridge

1517 Tombras Avenue  
East Ridge, Tennessee 37412  
(423) 867~7711

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Business Name Soliciting For: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Vehicle Year/Make/Model/Color: \_\_\_\_\_

License Tag #/State: \_\_\_\_\_ Driver's License #/State: \_\_\_\_\_

Tennessee Sales Tax # (if applicable): \_\_\_\_\_

Have you ever been arrested?  If yes, when and where? \_\_\_\_\_

**SOLICITOR MAY WORK DURING DAYLIGHT HOURS ONLY, USING MAIN ENTRANCE OF RESIDENCE. APARTMENT COMPLEXES DO NOT ALLOW SOLICITORS ON PREMISES.**

**PHOTO ID AND COMPANY ID ARE REQUIRED. YOUR SIGNATURE AUTHORIZES THE CITY OF EAST RIDGE TO PERFORM A BACKGROUND CHECK.**

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

Permit Fee: \$25.00  
Designation Display Fee: \$25.00  
Fees are non-refundable

City use only:
Permit Valid
From: _____ To: _____
Permit # _____