

**CITY OF ROCKDALE, TEXAS  
PEDDLER OR SOLICITOR PERMIT CHECKLIST**

**Original Application - Attach the following information**

- Completed Peddler or Solicitor Permit Application (all information completed, signed and notarized)
- Copy of Driver's License/State ID
- \$75 Peddler/Solicitor Permit Fee – **nonrefundable** (cash or money order)
- \$50 Permit Fee for each additional agent – **nonrefundable** (cash or money order)
- \$1,000 Surety Bond
- Copy of State Tax Payer's Certificate (Tax ID#)
- Notice of Peddler or Solicitor Ordinance Regulations – signed by applicant
- Consent document authorizing background check – signed by applicant
- Certificate of Authority to Represent Company – if necessary
- Agreement to Grant Permission for Use of Private Property – if necessary
- Documentation – provide proof of organization's exemption from ordinance requirements, if applicable
- Charitable solicitor's permit – no permit fee (background check and organization documentation required)
- Religious solicitor's permit – no permit fee unless soliciting funds, then background check and organization documentation required

Submit completed application between the hours of 8:00 a.m. – 5:00 p.m. to:

City Secretary's Office  
Rockdale City Hall  
505 W Cameron Avenue  
Rockdale, Texas 76567  
512-446-2511



City of Rockdale  
**PEDDLER / SOLICITOR  
APPLICATION**

Date of Application: \_\_\_\_\_

**PERMIT NUMBER:** \_\_\_\_\_ **PERMIT PERIOD:** \_\_\_\_\_ **TO** \_\_\_\_\_  
**ORGANIZATION/COMPANY:** \_\_\_\_\_

**Instructions:** Print all information requested. Do not leave any spaces blank. If a particular section is not applicable to you, indicate such. Applications which are incomplete or contain false information or misrepresentation will be rejected.

**APPLICANT INFORMATION**

Name (first, middle, last): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Drivers License/State ID Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Will a motor vehicle be used in your activities as a Solicitor/Peddler?  YES  NO

If yes, please provide the following information:

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Style \_\_\_\_\_ Color \_\_\_\_\_

License plate number \_\_\_\_\_ State Registered \_\_\_\_\_ Ins Policy Period \_\_\_\_\_ to \_\_\_\_\_

Name of liability insurance carrier & policy number \_\_\_\_\_

Address while peddling/soliciting in Rockdale: \_\_\_\_\_

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

Phone number while peddling/soliciting in Rockdale: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been arrested, charged or convicted of a felony or misdemeanor?  YES  NO

If yes, list the date of arrest, nature of the offense(s), location and the punishment or penalty: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ORGANIZATION/COMPANY INFORMATION**

Organization/Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Local Phone: \_\_\_\_\_

**PEDDLER/SOLICITATION INFORMATION**

State the type of goods/service you desire to sell: \_\_\_\_\_  
Specify the location to peddle/solicit goods/service: \_\_\_\_\_  
Approximate dates peddlers/solicitors will be in City: \_\_\_\_\_  
List all cities you have worked in the previous 90 days: \_\_\_\_\_

**Applicant's Authorization and Affirmation**

I authorize the City of Rockdale to make an investigation of all information contained in this application for this permit, and do hereby authorize a review, full disclosure and release of all records, including but not limited to photocopies of records concerning myself, the company or organization to any duly authorized agent of the City of Rockdale, whether the said records are of public, private, or confidential nature. I further release from all liability all persons and agencies supplying such information.

**WARNING:** False statement on this application constitutes Perjury and, upon conviction, is punishable by up to one year in jail, a fine up to \$2,000.00, or both. I hereby swear or affirm that the information given on this application is true and correct. **I acknowledge that application fees for denied applications will be forfeited.** Applications will be approved or denied within five (5) working days of submission of complete application and documentation.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF TEXAS §  
COUNTY OF MILAM §

**BEFORE ME**, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me, to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purpose and consideration therein expressed.

Signed and sworn to before me the undersigned authority on this the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public In And For The State Of Texas

Fees Collected: \$ _____	Receipt Number: _____	Date: _____
<input type="checkbox"/> <b>APPROVED</b>	<input type="checkbox"/> <b>DENIED</b>	
Reason for denial: _____		

**CONSENT DOCUMENT**  
**City of Rockdale, Texas**

In connection with my application for a Peddler's/Solicitor's Permit with the City of Rockdale, I understand that an investigative report may be requested or made on myself, and same is hereby authorized, including criminal record, driving record and social security number verification. Further, I understand that you may be requesting information from various Federal, State, local and other agencies regarding my past activities. By executing this Consent Document, I hereby authorize without reservation, any party or agency contacted by the City of Rockdale to furnish the information referenced above or requested below.

Applicant's Legal Name (first, middle, last): \_\_\_\_\_

List any other names used: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Drivers License/State ID Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Name as it appears on Drivers License/State ID: \_\_\_\_\_

**List All Residential Addresses in the Last 7 Years**

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

I authorize the release of such information as may be necessary to verify the information I have provided. I release and hold harmless from all liability any individual or entity requesting or supplying information with respect to my application for a Peddler's/Solicitor's Permit.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**City of Rockdale, Texas**  
**NOTICE OF PEDDLER or SOLICITOR ORDINANCE REGULATIONS**  
(To be signed and attached to Original Application)

**PERMIT**

It is unlawful for any person to peddle or solicit in the City without having first obtained the required City of Rockdale permit.

It is unlawful for any person to peddle or solicit without having the required permit on his person, or to fail or refuse to show or display such permit upon the request of any person demanding the same.

All persons shall display company or organization identification when conducting themselves as a peddler or solicitor within the City.

**PERMITTED HOURS OF SOLICITATION**

It is unlawful for any person acting as a peddler or solicitor to go in or upon the premises of a private residence in the City prior to 9:00 a.m. or after 8:00 p.m. of any day, Monday through Saturday, or at any time on Sunday or any other Federally designated holiday, or, on any day where the Department of Homeland Security has declared an Orange or Red State of Alert.

**PROHIBITED CONDUCT**

1. No peddling or solicitation is permitted on, in, upon, or around City Right of Way, with or without a permit.
2. Misrepresent the purpose of the peddling or solicitation.
3. Misrepresent the affiliation of those engaged in the peddling or solicitation.
4. Continue efforts to peddle or to solicit from an individual once that individual informs the peddler/solicitor that he/she does not wish to give anything to or to buy anything from that peddler/solicitor.
5. Represent the issuance of any permit under this chapter as an endorsement or recommendation of the peddling or solicitation.
6. Peddle or solicit at any residence or building which has posted a "No Peddlers" or "No Solicitors" sign.
7. Act in any manner that is contrary to local, State, or Federal law.

**YOUR ORGANIZATION'S PERMITS TO PEDDLE OR SOLICIT WILL BE REVOKED IMMEDIATELY FOR ANY OF THE FOLLOWING:**

1. Failure to provide a complete and thorough application, or the falsification of any part of the application.
2. Peddler or solicitor engages in any type of "hard sell" or disruptive tactics.
3. Peddler or solicitor refuses to leave the premises when an individual has informed the peddler/solicitor that he/she does not wish to give or purchase anything.
4. Peddler or solicitor goes on property where the owner has displayed a sign that says "No Peddlers" or "No Solicitors."
5. Peddler or solicitor misrepresents the purpose of the peddling or solicitation.
6. Peddler or solicitor misrepresents the affiliation of those engaged in the peddling or solicitation.
7. Peddler or solicitor engages in offensive, argumentative, or rude conduct.
8. Peddler or solicitor represents the issuance of any permit as an endorsement or recommendation of the peddling or solicitation.
9. Peddler or solicitor violates any Federal, State or local laws or ordinances.

I hereby understand and agree to abide by the above rules and regulations.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Rockdale City Secretary's Office, 505 West Cameron Avenue, Post Office Box 586, Rockdale, Texas 76567  
(512) 446-2511 ~ FAX (512) 446-6258



City of Rockdale
ADDITIONAL SOLICITOR
SUPPLEMENT

Date of Application: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_ PERMIT PERIOD: \_\_\_\_\_ TO \_\_\_\_\_
ORGANIZATION/COMPANY: \_\_\_\_\_

Instructions: Each additional person present during any solicitation who is affiliated with the organization must complete this form and pay the processing fee.

ADDITIONAL APPLICANT INFORMATION

Name (first, middle, last): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Drivers License/State ID Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Will a motor vehicle be used in your activities as a Solicitor/Peddler? [ ] YES [ ] NO

If yes, please provide the following information:

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Style \_\_\_\_\_ Color \_\_\_\_\_

License plate number \_\_\_\_\_ State Registered \_\_\_\_\_ Ins Policy Period \_\_\_\_\_ to \_\_\_\_\_

Name of liability insurance carrier & policy number \_\_\_\_\_

Address while peddling/soliciting in Rockdale: \_\_\_\_\_

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

Phone number while peddling/soliciting in Rockdale: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been arrested, charged or convicted of a felony or misdemeanor? [ ] YES [ ] NO

If yes, list the date of arrest, nature of the offense(s), location and the punishment or penalty: \_\_\_\_\_

**ORGANIZATION/COMPANY INFORMATION**

Organization/Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Local Phone: \_\_\_\_\_

**Applicant's Authorization and Affirmation**

I authorize the City of Rockdale to make an investigation of all information contained in this application for this permit, and do hereby authorize a review, full disclosure and release of all records, including but not limited to photocopies of records concerning myself, the company or organization to any duly authorized agent of the City of Rockdale, whether the said records are of public, private, or confidential nature. I further release from all liability all persons and agencies supplying such information.

**WARNING:** False statement on this application constitutes Perjury and, upon conviction, is punishable by up to one year in jail, a fine up to \$2,000.00, or both. I hereby swear or affirm that the information given on this application is true and correct. **I acknowledge that application fees for denied applications will be forfeited.** Applications will be approved or denied within five (5) working days of submission of complete application and documentation.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF TEXAS                    §  
COUNTY OF MILAM               §

**BEFORE ME**, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me, to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purpose and consideration therein expressed.

Signed and sworn to before me the undersigned authority on this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public In And For The State Of Texas

Fees Collected: \$ _____	Receipt Number: _____	Date: _____
<input type="checkbox"/> <b>APPROVED</b>		<input type="checkbox"/> <b>DENIED</b>
Reason for denial: _____		
_____		

**CERTIFICATE OF AUTHORITY TO REPRESENT COMPANY**

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**ORGANIZATION/COMPANY**

Organization/Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Local Phone: \_\_\_\_\_

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I hereby certify that should the City of Rockdale approve a Solicitors application for a below listed person, that person is authorized to represent and solicit for:

\_\_\_\_\_ [name of Company]

and the below listed person(s) is/are an employee and/or agent of the company.

Printed name (last, first): \_\_\_\_\_

**(This certificate must be signed by a President, Vice-President, General Manager, Sales Manager, Assistant Sales Manager or District Sales Manager of the company)**

\_\_\_\_\_  
Printed Name (last, first)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**AGREEMENT TO GRANT PERMISSION FOR USE OF PRIVATE PROPERTY  
AND  
ACKNOWLEDGEMENT OF ACCEPTANCE OF PERSONAL LIABILITY FOR  
VENDING ACTIVITIES**

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I, \_\_\_\_\_ [name], am the owner of property located at \_\_\_\_\_ [address], Rockdale, Texas (Property Owner).

As Property Owner, I understand that Vendor has applied to the City for a Permit to conduct these activities, and that my written permission is required for the City to issue the necessary permit, as per City Ordinance, Chapter 4, Article 4.507.

I have granted permission for \_\_\_\_\_ [name of Permit applicant] (Vendor) to conduct vending/peddling/soliciting activities on my property on the following dates, and during the following hours:

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

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

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

Further, I agree and acknowledge that I, as Property Owner, shall be **jointly and severally responsible and liable**, along with the Vendor(s), for full compliance with all requirements of the City's Ordinance concerning Peddling, Soliciting and Vending from Private Property, and, further, that **I shall be subject to penalty, and fines for violations**, as noted in the Ordinance, for any violation by Vendor(s) of the City's Ordinance or Permit.

\_\_\_\_\_  
Printed Name of Property Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature