

Application to Register as a Public Safety Solicitor

click on area to type information in and tab to move to next question

1. Name _____
2. The applicant is a:
 corporation
 partnership
 individual
3. Has the applicant ever been known under any name other than that given above?
 yes
 no
 If yes, list each such name:

4. Address

If address is not in Maryland, give principal Maryland address, if any, where financial records are kept:

5. Telephone _____ FAX: _____ E-mail: _____
 Federal ID or Social Security No. _____

6. List all Officers, Directors or Partners

Name	Title	Residential Address
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7. List person(s) having more than a 5% financial interest or ownership

Name	Title	Residential Address
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