



# Kinston Police Department

P.O. Box 339 / 205 E. King Street  
Kinston, North Carolina 28502  
Phone: (252) 939-3139 / Fax: (252) 939-3276  
Website: [www.kinstonpd.org](http://www.kinstonpd.org)



Keith Goyette, Chief of Police

To: Police Chief

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

Pursuant to Section 14-18 of Kinston Code of Ordinances, the undersigned hereby makes application for a permit to solicit in the City of Kinston, North Carolina.

Full Name: \_\_\_\_\_ SSN: (last four digits): \_\_\_\_\_

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

Corporation: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Weight: \_\_\_\_\_ Height: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Vehicle Used: \_\_\_\_\_ Tag #: \_\_\_\_\_ Color: \_\_\_\_\_

Goods/Services Sold: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Criminal History Attached: \_\_\_\_\_ Fingerprints Attached: \_\_\_\_\_ Copy of Driver License: \_\_\_\_\_

**THIS PERMIT WILL EXPIRE 90 DAYS FROM ABOVE DATE**

Sworn to and subscribed before me, this the  
\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
Notary Public

\_\_\_\_ Approved \_\_\_\_\_ Disapproved

My Commission expires: \_\_\_\_\_

\_\_\_\_\_  
Chief of Police/Designee