



**HAVERHILL
POLICE DEPARTMENT**

Robert Pistone, Jr
Chief of Police

40 Bailey Blvd.
Haverhill, Massachusetts 01830

TEL. (978) 722-1502
FAX. (978) 373-3981

The undersigned respectfully asks that he/she may receive a License:

HAWKER OR PEDDLER ENGAGED IN DOOR-TO-DOOR SALES

Type of Goods/Wares/Merchandise/Services to be Sold

Name _____

Social Security # _____

Date of Birth: _____

Residential Address: _____

Home Phone # _____ Cell Phone # _____ Work Phone # _____

Name of Business _____

Address of Business _____

Signature: _____

Checks made payable to City of Haverhill in the amount of \$100.00 due at time of submitting application.

It is the responsibility of the applicant to check the Police Department's website at www.haverhillpolice.com on a weekly basis for updated Do Not Knock addresses.

Police Chief

APPROVED _____

DENIED _____

Fee: _____



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CORI Request Form

The City of Haverhill has been certified by the Criminal History System Board for access to conviction and pending criminal case data. As an applicant/employee for the City of Haverhill, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Applicant/Employee Signature

Last Name	First Name	Middle Name	
Maiden Name or Alias (if applicable)	Place of Birth	Date of Birth	
Social Security Number (requested but not required)	ID Theft Index Pin (if applicable)	Mother's Maiden Name	
Current Address	City	State	Zip
	Ft. In.		
Sex	Height	Weight	Eye Color

State Driver's License Number: _____

*** The above information was verified by reviewing the following forms of government issued photographic identification (of which a copy **MUST** be attached):

Requested By: _____

Signature of CORI Authorized Employee