



PANHANDLING REGISTRATION

Ocoee Police Department
646 Ocoee Commerce Parkway | Ocoee, FL 34761
Phone: 407.905.3160 | Fax: 407.905.3166

Received Date – Office Use Only

An application for PANHANDLING REGISTRATION shall be filed before the solicitation takes place.

Applicant Name: _____		Phone Number: _____
E-mail: _____	Fax: _____	Mobile: _____
Address: _____		
Organization Name: _____		Phone Number: _____
E-mail: _____	Fax: _____	Mobile: _____
Headquarters Address: _____		
<input type="checkbox"/> Tax Exempt IRS 501(C) (3) <input type="checkbox"/> Must Provide Copy of Certificate		

ORGANIZATION REPRESENTATIVE (If different than applicant)

Representative Name: _____		Phone Number: _____
E-mail: _____	Fax: _____	Mobile: _____
Address: _____		

All information on the registration must be provided. Failure to complete may cause a delay in processing or issuing your registration.

Applicant Signature: _____ **Date:** _____

By signing below, you are acknowledging that a copy of the panhandling ordinance has been provided with your completed registration. You will be held accountable to the requirements of the ordinance.

Registrant Signature: _____ **Date:** _____

***** **OFFICIAL USE ONLY** *****

Photographic Identification Presented _____

Application Checked By: _____ Date: _____

Checked FCIC: _____ NCIC _____

Registration Status: Approved _____

Temporary Approval _____ *

Disapproved _____

*Expires 30 days from issuance, upon issuance of approved registration, or resolution of court proceedings on the charge of panhandling, whichever occurs first.