

Application for Commercial Solicitation.

(Please check box below for new or revalidation)

New

Revalidation

Name _____ Date _____

Business Name _____

Address _____

City _____ State _____ Zip _____

Work Phone Number _____ Home Phone Number _____

E-mail Address: _____

Website Address: _____

EIN (Employee Identification Number) : _____

Type of Business (Be specific): _____

Are you a current Federal or Non Appropriated Fund (NAF) employee?

Past Employment Last Five (5) Years: _____

Last Approval Date: _____

LIST OF DELIVERY DRIVERS
(PLEASE PRINT)

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

NAME: _____

LICENSE ID #: _____

EXPIRATION DATE: _____

USE ADDITIONAL SHEETS IF NEEDED

ACKNOWLEDGEMENT

- I have read and understand the content of Army Regulation AR 210-7, Commercial Solicitation on Army Installations. I understand that any violation of or noncompliance with regulation may result in the suspension or withdrawal of the privilege to solicit by myself, my employer, or both.
- I have checked with the Office of Business Permits and Regulatory Assistance, concerning state tax, licensing, and other requirements for operating a business in the State of New York and have taken the necessary steps to ensure compliance with all federal, state, and local tax, certification, licensing and other requirements.
- I understand that the privilege to solicit commercial activity is subject to approval by the Office of the Garrison Commander. I further understand that such approval is valid for one year and that a request for renewal must be submitted thirty days prior to the expiration of my authorization

APPLICANT'S NAME (PRINT)

APPLICANT'S SIGNATURE

DATE

**COMMERCIAL SOLICITATIONS PRIVILEGES
AT THE UNITED STATES MILITARY ACADEMY**

PERSONNEL BACKGROUND CHECK

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These instructions explain how to fill out the “Personnel Background Check”. Each column heading’s data is explained below:

Last Name First Name MI Suffix	These 4 items must be the legal name of the individual. Nick names and unofficial aliases are not acceptable. “MI” stands for Middle Initial. Suffixes are things like “Jr., Sr., III, ect.” These are required if they are part of the legal name of the individual
Date of Birth (DOB)	Employee’s date of birth. Formant as mm/dd/yyyy
City, State, Country of Birth	All three of these items must be provided
US NC LR TV	<u>Documentation maybe required:</u> United States Citizen Naturalized Citizen Legal Resident Temp Visa
State Driver License	Valid copy of NYS Driver License

PRINCIPAL PURPOSES(S): To obtain information for background investigations on personnel employed by the businesses applying for commercial solicitations privileges

ROUTINE USES: The Directorate of Plans, Training, Mobilization, and Security office and the Military Police will use information to conduct periodic background checks.

DISCLOSURE: Voluntary. However, failure to provide all the requested information may result in individuals not being granted solicitation privileges and/or entry to the installation.

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COMMERCIAL SOLICITATIONS PRIVELEGES
AT THE UNITED STATES MILITARY ACADEMY

PERSONNEL BACKGROUND CHECK

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As per Army Regulations 210-7 "Commercial Solicitations on Army Installations" a review of past employment/activities is required prior to granting solicitation privileges. A back ground check will be performed before privileges are granted. Solicitation privileges are granted for up to one year or less, as determined by the West Point Army Garrison (type or print, unreadable documents will not be accepted)

Date:	Business Name:
Business Address:	Phone: Fax: E-mail
Type of Business:	
Owner's Name:	Owner's Address:
Phone:	Emergency Contact:
Print Name:	Signature:
Official Use:	Receiving Officer:
Date Received:	

