

**Consumer Affairs Office
Solicitation Permit Application**

Privacy Act Statement: (5 USC 301). This application is used to determine suitability and qualification to conduct business on the Fort Hood Military Installation. Additionally, it is used to identify individuals suspected of violating Department of Defense Regulations governing solicitation privileges and is used to support Armed Forces Disciplinary Control Board actions initiated as a result of these alleged violation. All blank spaces must be completed and responses must be printed legibly. Disclosure of information is voluntary; however, if an individual chooses not to provide the information requested, this application will not be processed.

Warning: All applicants will have a local file check by the Provost Marshal.

Applicant's Information:

Name _____ SSN _____ DOB _____ Home _____
Home Address _____ Cit _____ State _____ Zip _____
Active Yes ___ No ___ Reserve? Yes ___ No ___ If Yes, give _____
Company Commander's _____ Commander's Phone _____
DOD Civilian Yes ___ No ___ If Yes, give _____
Supervisor's _____ Supervisor's Phone _____
Driver's License _____ State _____ Auto Make _____ Mode _____
Color _____ Year _____ Vehicle License Number/State _____ / _____
Have you ever had a federal or state conviction? Yes ___ No ___ If Yes, identify the offense(s) and date(s) of _____

Physical _____ Heigh _____ Weigh _____ Color _____ Color _____ Se _____

Corporation

Name of _____ Local Business Address _____
City _____ State _____ Zip _____ Telephone _____
Company's Headquarters Name and Address if different from above:
Name _____ Street _____ City _____
State _____ Zip _____ Telephone _____

Type of Business: (Please check one)

<input type="checkbox"/> Home Enterprise Sales	<input type="checkbox"/> Auto Sales	<input type="checkbox"/> Insurance	<input type="checkbox"/> Computer Service
<input type="checkbox"/> Food Service	<input type="checkbox"/> Telecommunication	<input type="checkbox"/> Photographic	<input type="checkbox"/> Education
<input type="checkbox"/> Other _____			

For Insurance Agents:

Type of Insurance _____ War Yes ___ No ___
Insurance License Number _____ Expiration _____

For All Others:

Distributorship? Yes ___ No ___ Personally Yes ___ No ___ Type of Products _____
Sales Tax Permit _____ Insurance _____ Policy _____

Employment

I have worked for the following employers for the past ten years:

Employer	Address	From	To

Solicitation On Military Installations:

Military Installation	Name and Type Business	From	To

Read the Solicitation Statement on the following pages and sign the application indicating you **understand** and **agree** to all provisions of the statement.

Solicitation Statement (AR 210-7)

Solicitation: The conduct of any private business, including the offering and sale of Insurance on a military installation, whether initiated by the seller or the buyer. Solicitation on installations is a **privilege** as distinguished from a right, and its control is a responsibility vested in the installation commander, subject to compliance with applicable regulations. (AR 210-7, page 1-1)

I have read and understand Army Regulation 210-7, as supplemented (copies are available to read in the solicitation Office, DWO). I attest that all information on my Solicitation Permit application is correct. I **understand** that:

1. Any violation or non-compliance with Department of Defense Directives and Army Regulations and their Supplements, **will** result in the withdrawal of my privilege to solicit and may also affect the privilege of my employer.
2. A current Fort Hood Solicitation Permit (FH Form 46) will be in **my** possession at all times while conducting business at Fort Hood.
3. I will **only** solicit for companies listed on my permit and sell **only** products listed in my application.
4. Name tags will **not** be worn that include the name of the company. Display desk or other signs announcing the name of my company or product affiliation is **not** permitted.
5. I will **not** leave business cards or advertising material for display or to be distributed by military or civilian

6. I will solicit on the installation **only** after receiving prearranged appointments. I will remain no longer than 15 minutes at designated area if soldier client does not appear for appointment.
7. Solicitation will be conducted **only** in areas designated by unit commanders and never in unauthorized or restricted areas.
8. Practices that involve giving rebates to customers, attempted elimination of competition, or misrepresentation of products will **not** be tolerated.
9. I will **not** give oral or written appearance that the Department of Defense or any Branch of Service sponsors or endorses my company, it's agents, services, or commodities for sale.
10. It is **my** responsibility when selling Insurance to determine if enlisted members being solicited are in grades E-1 through E-3. I will prepare DA Form 2056 (commercial Insurance Solicitation Record) and ensure the soldier is counseled by his commander before signing an insurance purchase application. Soldier will not start an allotment until seven days has elapsed from the time of counseling.
11. I will **not** address "mass" or "captive" audiences on the installation, even if requested by unit commanders. I will **not** solicit as a member of a team or give talks on financial planning insurance, military pay, or government benefits to groups. I will **not** participate in any military sponsored education or orientation program. I will **not** give Commanders
12. Department of Defense civilians or military members will **not** be induced or allowed to solicit the sale of insurance or other goods or services for me with or without compensation.
13. Department of Defense allotment forms are **not** available or authorized for agents to use or possess. Allotment forms will be completed by the soldiers' personnel centers **only**.
14. As Home Enterprise Agent, I will **not** use my government quarters as a showroom or storage facility for commercial products for resale.
15. I **will** return the Solicitation Permit upon my termination of employment with the business I currently represent. I **will** renew or surrender the Solicitation Permit by the expiration date annotated on the Fort Hood Form 46. I will **not** be issued a subsequent Solicitation Permit until the current permit is returned to this office.
16. It is **my** responsibility to keep the Solicitation Office informed of my current address and telephone number at all times.

SIGNATURE _____ DATE _____