



CITY OF SARATOGA SPRINGS
SOLICITATION LICENSE APPLICATION

1307 North Commerce Drive, Suite 200, Saratoga Springs, Utah 84045
(801) 766-9793 ♦ www.saratogaspringscity.com

<i>For Office Use Only:</i>		
Application Approved By:	Date:	License No.:
Amount Paid:	Receipt No.:	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit/Debit Card

SECTION I: Applicant Information

Applicant Name: _____

Applicant Address: _____

City: _____ State: _____ Zip: _____

Applicant Phone: _____

Date of Birth: _____ SSN: _____

Driver License/ID Card No.: _____ State: _____

SECTION II: Business Information

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Email: _____

Description of product(s) sold or service(s) provided:

Previous employment/businesses:

- (1) _____
- (2) _____
- (3) _____
- (4) _____

SECTION III: Items Required With Application

BCI Report less than 180 days old

Please attach

Proof of Identification

One of the following:

- Valid Driver License/ID Card
- Valid US Passport
- Valid US Military ID Card

Any licenses/permits required to transact this business

Please attach

SECTION IV: Disqualifying Status Questions

I have:

(1) been criminally convicted of:

- Felony homicide Yes No
- Physically or sexually abusing, or exploiting a minor Yes No
- The sale or distribution of controlled substances Yes No
- Sexual assault of any kind Yes No

(2) criminal charges currently pending against me for:

- Felony homicide Yes No
- Physically or sexually abusing, or exploiting a minor Yes No
- The sale or distribution of controlled substances Yes No
- Sexual assault of any kind Yes No

(3) been criminally convicted of a felony with the last (10) years.

Yes No

(4) been incarcerated in a federal or state prison within the past (5) years.

Yes No

- (5) been criminally convicted of a misdemeanor within the past 5 years involving a crime of:
- | | | |
|---|------------------------------|-----------------------------|
| Fraud, dishonesty, or misrepresentation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Violent or aggravated conduct involving persons or property | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Domestic violence | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
- (6) a final civil judgment entered against me within the last (5) years, indicating that:
- | | | |
|--|------------------------------|-----------------------------|
| I have engaged in fraud, dishonesty or intentional misrepresentation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|--|------------------------------|-----------------------------|
- (7) an outstanding arrest warrant from any jurisdiction. Yes No
- (8) I am currently on parole or probation to any court, penal institution, or governmental entity, including being under house arrest or subject to a tracking device. Yes No
- (9) I am currently subject to a protective order based on physical or sexual abuse issued by a court of competent jurisdiction. Yes No

SECTION V: Solicitor's License Fees

New Solicitation License Fee: \$100.00 per year, \$35.00 for each employee

SECTION VI: Applicant Agreement

I, the undersigned, do hereby verify, under penalty of perjury, that the information provided herewith is complete, truthful, and accurate to the best of my knowledge and belief. I do hereby agree to allow the City to review a name/date of birth BCI background check. I agree to conduct business in complete accordance with all laws, ordinances, and regulations governing operation of such business. I acknowledge that soliciting without a valid certificate in plain view may result in revocation of such and/or citation. In understand that once the certificate of registration is issued, it becomes invalid if any of the application information changes and a new application will be required to update the information on record.

Applicant Signature: _____ Date: _____

Applicant Printed Name: _____