DELTA CITY
www.delta.utah.gov
76 N 200 W, Delta, UT 84624-9440
435.864.2759 V -- 435.864.4313 F

RESIDENTIAL SOLICITATION APPLICATION

The following information must accompany this application:

1. An original or copy of the applicant's criminal background check dated no older than 180 days prior to the date of application, from RESIDING STATE and the Utah Department of Public Safety Bureau of Criminal Identification; or verification by the Utah Department of Public Safety Bureau of Criminal Identification that no criminal history is found on the applicant.

2. A signed copy of a waiver whereby applicant agrees to allow the City to obtain a name/date of birth BCI background check on applicant.

3. Special Events Sales Tax Number. To obtain this number, please call **801.297.6303.**

4. Proof of Registration with the Utah State Department of Commerce.

5. Proof of identification: (one of the following)
   A. A valid driver license or identification card issued by any state
   B. A valid passport issued by the United States
   C. A valid identification card issued by a branch of the United States military

6. Marketing Information: The goods or services offered, including any commonly known registered or trade names. A copy of any other licenses, permits, registrations, or other qualifications required by federal or state law to promote, provide, or render advice regarding the offered goods or services.

7. Two current passport size photos.

Application Fee: $100.00 USD

$10.00 per additional applicant

NOTICE: All information required by the City ordinance must accompany the application form and be checked by a business licensing official before the form is processed.

DISQUALIFYING STATUS

Applicant Information

Criminally Convicted means the final entry of a conviction, whether by a plea of no contest, guilty, entry of judicial or jury finding of guilt, which has not been set aside on appeal or pursuant to a writ of habeas corpus. The criminal conviction is that offence of which applicant or registered solicitor was convicted, without regard to the reduced status of the charge after completion of conditions of probation or parole, and charges dismissed under a plea in abeyance or diversion agreement.

Disqualifying status means the denial or suspension of a certificate for the following:

1. The applicant or registered solicitor has been criminally convicted of (1) felony homicide, (2) physically abusing, sexually abusing, or exploiting a minor, (3) the sale or distribution of a controlled substance, or (4) sexual assault of any kind.

2. Criminal charges currently pending against the applicant or registered solicitor for (1) felony homicide, (2) physically abusing, sexually abusing, or exploiting a minor, (3) the sale or distribution of a controlled substance, or (4) sexual assault of any kind.

3. The applicant or registered solicitor has been criminally convicted of a felony within the past ten (10) years.

4. The applicant or registered solicitor has been incarcerated in a federal or state prison within the past five (5) years.

5. The applicant or registered solicitor has been criminally convicted of a misdemeanor within the past five (5) years involving a crime of moral turpitude which includes, but is not limited to, possession of a controlled substance, theft, fraud, falsification in official matters, offenses against privacy, lewdness, and voyeurism or violent or aggravated conduct involving persons or property.

6. A final civil judgment entered against the applicant or registered solicitor within the past five (5) years indicating that: (1) the applicant or registered solicitor had either engaged in fraud, or intentional misrepresentation, or (i2) a debt of the applicant or registered solicitor was non-dischargeable in bankruptcy pursuant to 11 U.S.C. § 523 (a)(2), (a)(4), (a)(6), or (a)(19).

7. The applicant or registered solicitor is currently on parole or probation to any court, penal institution, or governmental entity, including being under house arrest or subject to a tracking device.

8. The applicant or registered solicitor has an outstanding arrest warrant from any jurisdiction.

9. The applicant or registered solicitor is currently subject to a protective order based on physical or sexual abuse issued by a court of competent jurisdiction.

WRITTEN DISCLOSURES

Applicant Information

1. The applicant's submission of the application authorizes the City to verify information submitted with the completed application including:

A. The applicant's address

B. The applicant's and responsible person or entity's state tax identification and special use tax numbers, if any; and

C. The validity of the applicant's proof of identity.

2. The City may consult any publically available sources for information on the applicant including, but not limited to, databases for any outstanding warrants, protective orders, or civil judgments.

3. Establishing proof of identity is required before registration is allowed.

4. The application fee must be submitted by applicant with a completed application.

5. The applicant must submit a BCI background check with a completed application.

6. To the extent permitted by State and/or Federal law, the applicant's BCI background check shall remain a confidential, protected, private record not available for public inspection.

7. The City will maintain copies of the applicant's application form, proof of identity, and identification badge. These copies will become public records, available for public inspection on demand, at the City offices whether or not a certificate is denied, granted or renewed.

8. The criteria for disqualifying status, denial, or suspension of a certificate under the provisions of this chapter will be provided to applicant.

9. A request for a temporary certificate will be granted or denied the same business day that a completed application is submitted.

DELTA CITY www.delta.utah.gov
76 N 200 W, Delta, UT 84624-9440
435.864.2759 V -- 435.864.4313 F

APPLICATION FOR CERTIFICATE PERMITTING DOOR-TO-DOOR SOLICITATION	Date Received: _____ By Delta City Staff _____

True/Correct Legal Name of Solicitor: _____ Contact Phone No.: _____

All former names/aliases used by Applicant during last 10 years: _____

_____

Applicant: Date of Birth: _____ SSN: _____ DL/ID No.: _____ State: _____

Applicant's home street address: _____

Applicant's mailing address (if different): _____

Name of Responsible Person or Entity: _____

Address of Responsible Person or Entity: _____

Responsible Person/Entity Tel. No.: _____ Special Event Sales Tax No.: _____

Address by which all notices to applicant are to be sent: _____

PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS :

	Yes	No
Have you ever been criminally convicted of:		
felony homicide?	____	____
sexual assault of any kind?	____	____
physically abusing, sexually abusing, or exploiting a minor?	____	____
sale or distribution of a controlled substance?	____	____
Are any criminal charges currently pending against you for:		
felony homicide?	____	____
sexual assault of any kind?	____	____
physically abusing, sexually abusing or exploiting a minor?	____	____
sale or distribution of a controlled substance?	____	____
Have you been convicted of a felony within the last ten (10) years?	____	____
Have you been incarcerated in federal or state prison within the last five years?	____	____

Have you been criminally convicted of a misdemeanor within the past five (5) years involving:

	Yes	No
Has a final civil judgment been entered against you within the last five (5) years indicating that a debt was non-dischargeable in bankruptcy	_____	_____
Are you on parole or probation by any court or penal institution or governmental entity, including being under house arrest or subject to a tracking device?	_____	_____
If so, by whom? _____		
Do you have an outstanding arrest warrant from any jurisdiction?	_____	_____
Are you currently subject to a protective order based on physical or sexual abuse issued by a court of competent jurisdiction?	_____	_____

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 authorize and allow the City to obtain a name/date of birth BCI background check for enforcement purposes. 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. I 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.

_____ _____ _____ _____

Signature of Applicant Date Delta City Licensing Official Approval Date

For Office use only:

Proof of Identity: (check one)

_____ Valid driver's license issued by any state

_____ Valid passport issued by the United States

_____ Valid identification card issued by any state

_____ Valid identification issued by a branch of the U.S. military

Proof of Registration with Dept. of Commerce

_____Applicant

_____ Responsible Person or Entity

Special Events Sales Tax No. _____

Marketing Information: Goods or services offered by applicant, including commonly known, registered or trademarked items:

_____

_____

_____

BCI Background check:

_____ Original or copy of a BCI background check

_____ Signed waiver authorizing City to obtain name/date or birth BCI background check for purposes of enforcement

Permanent Certificate Due: _____