



CUSTOMER SERVICE

SOLICITOR PERMIT REQUIREMENTS

ALL DOCUMENTATION MUST BE SUBMITTED AT THE TIME YOU SUBMIT THE APPLICATION. ANY MISSING DOCUMENTATION WILL CAUSE YOUR APPLICATION TO BE REJECTED. NON REFUNDABLE FEES MUST BE PAID AT THE TIME OF SUBMISSION

- Solicitor Application
- Copy of picture Government issued ID.
- Copy of the Utah Department of Commerce business name registration (if applicable).
- Copy of the current business license (if the business is based in the State of Utah)
- Copy of the Sales Tax number (if selling a product)
- Background check.

(Background checks can be done with the PCPD, Provo City Police Department, or you may go to the BCI, Bureau of Criminal Identification, located at 3888 W 5400 S, Taylorsville, UT.

**** Background checks must be within the last 180 days.**

Non-Utah resident - MUST provide a background check from the state they reside. The background check must match the state the driver's license was issued from.

Once the application, required documents, and fees are submitted, the applicant's picture is taken and a temporary permit is issued. Once all approvals have been completed, a permanent permit and the I.D. badge are issued. The individual solicitor license will be available for pick up, or may be mailed upon request. For card replacement, a fee may be assessed.

EACH INDIVIDUAL SOLICITOR NEEDS THEIR OWN PERMIT.

If you have questions, or want to know more regarding the policies for Solicitor requirements, you can go to Provo.org under Council to find the Provo City Code chapter 6.09.



CUSTOMER SERVICE

SOLICITOR APPLICATION FOR CERTIFICATE OF REGISTRATION

OFFICE USE ONLY

CSR INITIALS _____
DATE _____
LICENSE# _____
PAYMENT _____

APPLICANT INFORMATION

Legal Name of Applicant _____
Former Names or Aliases (used in the last 10 years) _____
Home Address _____
City _____ State _____ Zip Code _____
Mailing Address (if different) _____
City _____ State _____ Zip Code _____
Email _____
Primary phone number (_____) _____ Secondary Telephone (_____) _____

ORGANIZATION / COMPANY INFORMATION

Organization/Company Name _____
Business Address _____
City _____ State _____ Zip Code _____
Primary phone number (_____) _____ State Sales Tax Number: _____
Utah State Registration Number (mandatory) _____
State License Number (if applicable) _____

APPLICANT'S IMMEDIATE SUPERVISOR INFORMATION

Supervisor Name _____
Supervisor Business Address _____
City _____ State _____ Zip Code _____
Email Address _____
Phone Number (_____) _____

COMMODITIES OR SERVICES INFORMATION

Detailed description of product sold or service(s) provided:

Empty rectangular box for detailed description of product sold or service(s) provided.

I understand that by submitting this application, I authorize the City to verify the information and may consult any publicly available resource necessary for validation purposes. I also understand that this license may be revoked due to violation of the provisions of the Provo City Code. I clearly understand and am fully aware of the regulations and restrictions for door to door solicitation in the City of Provo. I do hereby agree to abide by these regulations and restrictions.

I understand that a license, permit, or certificate of registration may not be transferred to another person or entity.

Signature _____ Date _____

Print Name _____

PERSONAL HISTORY QUESTIONS

	YES	NO
Have you ever been criminally convicted of felony homicide?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been criminally convicted of physically abusing a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been criminally convicted of sexually abusing a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been criminally convicted of exploiting a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been criminally convicted of the sale or distribution of controlled substances?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been criminally convicted of sexual assault of any kind?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any criminal charges currently pending against you for felony homicide?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any criminal charges currently pending against you for physically abusing a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any criminal charges currently pending against you for sexually abusing a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any criminal charges currently pending against you for exploiting a minor?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any criminal charges currently pending against you for the sale or distribution of controlled substances?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any criminal charges currently pending against you for sexual assault of any kind?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been criminally convicted of a felony within the last ten (10) years?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been incarcerated in a federal or state prison within the past five (5) years?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been convicted of a misdemeanor within the past (5) years involving a crime of moral turpitude?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been convicted of a misdemeanor within the past (5) years involving a crime of violent or aggravated conduct involving persons or property?	<input type="checkbox"/>	<input type="checkbox"/>
Has a final civil judgement been entered against you within the last five (5) years indicating that you have engaged in fraud?	<input type="checkbox"/>	<input type="checkbox"/>
Has a final civil judgement been entered against you within the last five (5) years indicating that you have engaged in misrepresentation?	<input type="checkbox"/>	<input type="checkbox"/>
Has a final civil judgment been entered against you within the last five (5) years indicating that a debt was non-dischargeable in bankruptcy pursuant to 11 U.S.C.?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently on parole or probation by any court or penal institution or governmental entity, including being under house arrest or subject to a tracking device?	<input type="checkbox"/>	<input type="checkbox"/>
Please list by whom _____		
Do you have an outstanding arrest warrant from any jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently subject to a protective order based on physical or sexual abuse issued by a court of competent jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>