CITY OF CHEYENNE

BUSINESS LICENSE APPLICATION

RESIDENTIAL DOOR-TO-DOOR SOLICITORS

LICENSE FEE: $100.00 PER FOURTEEN (14) CONSECUTIVE DAY PERIOD OR PORTION THEREOF
$15.00/PERSON/ID BADGE

LICENSE # _____

NOTE: This license is for the selling or offering for sale, or taking or attempting to take orders for the sale of goods, merchandise or services of any kind, character or description as outlined in City Code Chapter 5.76 relative to residential door-to-door soliciting. THERE SHALL BE NO SOLICITATION UPON ANY PREMISES, PRIOR TO 10:00 A.M. OR AFTER 7:00 P.M., LOCAL TIME, OF ANY DAY. (Ordinance No. 4064 and City Code Title 5, Chapter 5.76)

ATTACH THE FOLLOWING:

_____ **If filing as a charitable, non-profit applicant, written proof of charitable, non-profit status as declared by the IRS (i.e. 501(c)(3) documentation).**

_____ **Copy of applicant's current driver's license or other similar form of photo identification.**

_____ **Full legal name of all solicitors including residential address, date of birth and proof that the individual is at least 18 years of age. Listing of solicitor information MUST be legible to process the application.**

_____ **Two 2" x 2" front-face portrait photographs for each solicitor.**

_____ **Any advertising materials (brochure, flyer, merchandise listing, sales agreement, etc.) which may be used in conjunction with proposed sales which must state Federal Trade Commission regulations of any orders/sales with cancellation clause.**

APPLICANT'S NAME: _____

APPLICANT'S DATE OF BIRTH: _____

APPLICANT'S HOME ADDRESS/CITY/STATE/ZIP: _____

_____

BUSINESS OR ORGANIZATION NAME: _____

BUSINESS PHYSICAL ADDRESS/CITY/STATE/ZIP: _____

BUSINESS MAILING ADDRESS/CITY/STATE/ZIP (if different from physical address): _____

_____

BUSINESS TELEPHONE NO: _____ **CELL PHONE NO:**_____

PROPOSED SELLING DATES: _____ **TO** _____ **HOURS:** _____

DESCRIPTION OF ITEM(S) OR SERVICE(S)TO BE OFFERED FOR SALE: _____

_____

_____

NAME OF INDIVIDUAL WITH CURRENT CONTACT INFORMATION WHO WILL BE RESPONSIBLE ON BEHALF OF LICENSEE FOR SUPERVISING ANY INDIVIDUAL(S) RECEIVING A LICENSE I.D. BADGE TO CONDUCT DOOR-TO-DOOR SOLICITATION: _____

_____

IS THE APPLICANT, OR AFFILIATED BUSINESS OR ORGANIZATION, AUTHORIZED BY THE WYOMING SECRETARY OF STATE TO DO BUSINESS WITHIN WYOMING? YES_____ NO_____

HAVE YOU CONTACTED THE WYOMING STATE SALES TAX OFFICE (DEPT. OF REVENUE & TAXATION)? YES_____ NO _____

HAS THE APPLICANT, OR AFFILIATED BUSINESS OR ORGANIZATION, EVER HAD A SIMILAR TYPE OF BUSINESS LICENSE, WHETHER WITHIN WYOMING OR ELSEWHERE, REVOKED, SUSPENDED OR DENIED? YES _____ NO _____

Will orders be taken for future delivery of merchandise or services? Yes _____ No _____
Will merchandise or services be delivered at time of sale? Yes _____ No _____
Will payment be made at time of sale or upon delivery? _____

FILING DEADLINE: A minimum of 5 business days is required to process application

AFFIDAVIT/AUTHORIZATION

The undersigned applicant hereby authorizes the City of Cheyenne and its agents and employees to seek information and conduct investigations into the truth of the foregoing statements as set forth in this application, and agrees to comply fully with the rules and regulations of the City of Cheyenne, Wyoming, governing the license requested, and further declares that the foregoing information contained in this application is true and correct.

I ALSO ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE REQUIREMENTS AND RESTRICTIONS CONTAINED IN CHAPTER 5.76 OF CHEYENNE CITY CODE GOVERNING THE DOOR-TO-DOOR SOLICITORS BUSINESS LICENSE; AFFIRM I WILL SHARE THE LICENSE REQUIREMENTS WITH ALL APPROVED INDIVIDUAL DOOR-TO-DOOR SOLICITORS, AND AGREE TO BE HELD RESPONSIBLE FOR THE ACTIONS OF APPROVED SOLICITORS AFFILIATED WITH THE APPLICATION.

_____
Applicant Signature

_____
Date

STATE OF WYOMING)
) ss.
County of Laramie)

Subscribed and sworn to before me this _____ day of _____, _____.

_____
Notary Public
SEAL **My commission expires:** _____

This application is available in alternative, accessible formats upon request.

APPROVALS:

The Mayor and City Clerk will provide written approval only after all other approvals have been obtained. The City Clerk's staff will acquire these approvals for applicants.

City/County Environmental Health: _____
(100 Central Avenue/633-4090)

Police Department: _____
(415 W. 18th St./637-6535)
Recommend _____Approval _____Denial of Applicant/Business License
Recommend _____Approval _____Denial of Individual Solicitors

Mayor: _____
(2101 O'Neil Avenue., Room 310/637-6300)

City Clerk: _____
(2101 O'Neil Avenue, Room 101/638-4301)

FOR USE BY CITY CLERK'S OFFICE: BY: _____

M/R # _____ FEE PAID $ _____ DATE PAID: _____ DATE ISSUED: _____

TERM OF LICENSE: _____

COMMENTS: _____

_____