



TOOELE CITY CORPORATION
90 NORTH MAIN STREET
TOOELE, UTAH 84074
PHONE: 435-843-2110 FAX: 435-843-2119

FOR OFFICE USE ONLY
Business License #: _____
of ID Badges: _____
Amount Paid: \$ _____
Date Paid: _____
Receipt #: _____
Building Dept. #: _____

**APPLICATION FOR ITINERANT OR TRANSIENT MERCHANT
OR SOLICITOR LICENSE**

BUSINESS NAME: _____ BUSINESS PHONE: () _____

BUSINESS LOCATION: _____
(STREET) (CITY) (STATE) (ZIP)

MAILING ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

NAME OF OWNER: _____ PHONE: () _____ hm: () _____ wk: () _____

ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

NAME OF MANAGER: _____ PHONE: () _____ hm: () _____ wk: () _____

ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

NATURE OF BUSINESS: _____

CHARACTER REFERANCE:

(NAME) (ADDRESS) (PHONE)

All Tooele City business licenses expire December 31st of each year. Base license fee is \$40.00 plus \$10.00 for each ID badge

- Each applicant for a solicitor's license shall submit a copy of the applicant's current criminal history on file at the, Utah Department of Public Safety Bureau of Criminal Identification.
- Applicants must have proof of a valid drivers license issued by any state, valid passport issued by the United States, valid ID card issued by any state, or a valid ID card issued by a branch of the United States Military.
- Applicants must have proof of registration with the Department of Commerce either by the applicant the entity which the applicant is representing

Has the applicant been criminally convicted of felony homicide, physically abusing, sexually abusing, or exploiting a minor, sale or distribution of controlled substances, or sexual assault of any kind? YES NO

Are any criminal charges currently pending against the applicant for felony homicide, physically abusing, sexually abusing, or exploiting a minor, sale or distribution of controlled substances, or sexual assault of any kind? YES NO

Has the applicant been convicted of a felony within the last ten (10) years? YES NO

Has the applicant been incarcerated in a federal or state prison within the past five (5) years? YES NO

Has the applicant been criminally convicted of a misdemeanor within the past five (5) years involving a crime of moral turpitude, or violent or aggravated conduct involving persons or property? YES NO

Has a final civil judgment been entered against the applicant within the last five (5) years indicating that the applicant had either engaged in fraud, or international misrepresentation? YES NO

Is the applicant 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

Does the applicant have an outstanding arrest warrant from any jurisdiction? YES NO

Is the applicant currently subject to a protective order based on physical or sexual abuse issued by a court of competent jurisdiction? YES NO

Does the applicant have an outstanding arrest warrant from any jurisdiction? YES NO

Is the applicant currently subject to a protective order based on physical or sexual abuse issued by a court of competent jurisdiction? YES NO

**-NOTARIZATION REQUIRED FOR ALL NEW LICENSES-
AFFIDAVIT**

I _____ BEING DUILY SWORN DEPOSE AND SAY THAT I AM THE APPLICANT ABOVE NAMED AND THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND CORRECT.

DATE

APPLICANT'S SIGNATURE

STATE OF _____
COUNTY OF _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ 20_____.

NOTARY PUBLIC

I herby make application for LICENSE PRIVILEGES in Tooele City, Utah, for the above mentioned business. All license Privilege Applications to Tooele City require approval of the below mentioned departments. Temporary privileges may be granted subject to the approvals mentioned. In the event of disapproval of a license temporary privileges are immediately rescinded. A license will be issued upon completion and satisfaction of application requirements.

****FOR OFFICE USE ONLY****

RECORDERS OFFICE DATE

COMMENTS: _____

FIRE DEPARTMENT DATE

HEALTH DEPARTMENT DATE

BUILDING DEPARTMENT DATE

ZONING DEPARTMENT DATE
