



APPLICATION FOR SOLICITOR PERMIT- BADGE HOLDER

INFORMATION ON THIS APPLICATION IS PUBLIC RECORD.

PHONE (970) 221-6780 FAX (970) 221-6782

INSTRUCTIONS:

- 1. PLEASE PRINT OR TYPE INFORMATION.
2. ATTACH A CURRENT COPY OF YOUR CRIMINAL HISTORY RECORD AS MAINTAINED BY THE CBI, DATED NO MORE THAN SIXTY (60) DAYS PRIOR TO THE DATE OF APPLICATION.
3. ATTACH A COPY OF A VALID DRIVER'S LICENSE OR STATE ISSUED PHOTO IDENTIFICATION
4. PROVIDE A CURRENT PASSPORT SIZE PHOTO IN ELECTRONIC FORMAT
5. SIGN APPLICATION AND RETURN ENTIRE PACKET TO: CITY OF FORT COLLINS / SALES AND USE TAX OFFICE P.O. BOX 580 / 215 NORTH MASON STREET, 2ND FLOOR FORT COLLINS, CO 80522-0580
6. BADGE FEE: \$10.00
7. BADGE DEPOSIT - \$50.00

INFORMATION ABOUT BADGE HOLDER

NAME:
ADDRESS:
CITY, STATE, ZIP:
PHONE NUMBER: EMAIL ADDRESS:
DRIVER'S LICENSE NUMBER OR STATE ISSUED PHOTO IDENTIFICATION: ISSUING STATE: EXPIRATION DATE:
DATE OF BIRTH:
PHYSICAL DESCRIPTION: HEIGHT: WEIGHT: EYE COLOR: HAIR COLOR:
VEHICLE LICENSE PLATE NUMBER : VEHICLE MAKE AND MODEL:
HAVE YOU EVER BEEN CONVICTED OF A FELONY, OR A CRIME UNDER THE LAWS OF ANOTHER STATE THAT WOULD BE A FELONY UNDER THE LAWS OF THE STATE OF COLORADO, OR A CRIME AGAINST THE PERSON OR PROPERTY OF ANOTHER? YES NO

INFORMATION ABOUT EMPLOYER

NAME OF EMPLOYER: PHONE NUMBER:
EMPLOYER'S ADDRESS:
CITY, STATE, ZIP:
SUPERVISOR/MANAGER NAME: PHONE NUMBER:

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I FURTHER UNDERSTAND THAT ANY FALSE STATEMENT OR OMISSION OF INFORMATION WILL BE CAUSE FOR THE CITY TO REFUSE TO ISSUE A SOLICITOR'S BADGE.

SIGNATURE: TITLE: DATE:

FOR OFFICE USE ONLY DATE ISSUED: EXPIRATION DATE:
ACCOUNT #1000.421090 BADGE FEE: \$10.00 DATE PAID: BADGE DEPOSIT: \$50.00 DATE PAID: DATE REFUNDED: