



**SOLICITORS
BUSINESS LICENSE
APPLICATION**

West Bountiful City

BUSINESS LICENSING DEPARTMENT
550 N 800 W
West Bountiful, UT 84087
Phone: (801) 292-4486
www.wbcity.org

SECTION A - BUSINESS INFORMATION

Business Name: _____

DBA: _____

Business Address: _____

Phone: _____ Email: _____

Federal Tax ID No. _____ Sales Tax No. _____ (if applicable).

Specific description of business to be conducted (if goods are to be sold, include from whom and where the goods are obtained):

List other municipalities in which you have engaged in business in the past twelve months:

Requested Dates of Operation: _____ to _____. (Not to exceed 120 days)

Requested Hours of Operation: _____ to _____. (Soliciting is prohibited from 6:00 p.m. to 10:00 a.m.)

SECTION B - APPLICANT INFORMATION

Applicant's Name: _____ Phone: _____

Applicant's Address: _____

Have you, or any of your employers, been convicted of any crime, misdemeanor, or violation of any municipal ordinance? Yes No **If yes, state the nature of the offence, the date of conviction, and the punishment or penalty:** _____

Business and Applicant Certification:

I hereby agree to conduct this business strictly in accordance with Title 5 of the West Bountiful Municipal Code, and swear under penalty of law that the information contained herein is true and correct. I acknowledge that I must complete the entire application process and receive approval before a license can be issued; and that if I conduct business without a license, I will be subject to penalty in accordance with Title 5 of the West Bountiful Municipal Code. If I am signing on behalf of a business entity or organization, I represent and warrant that I have been duly authorized to do so. I understand the information on this application may be made available to the public upon request.

Applicant:

Date: _____

Business (if applicant works for another person or business entity):

Date: _____

Print Name: _____

Title: _____

SECTION C - FEES

Solicitor/Temporary License Fees:

Base Fee per Business						\$ 25.00	<i>plus</i>
Solicitors Fee (weekly)	_____	weeks	x	\$5.00	=	\$_____	<i>or</i>
Solicitors Fee (monthly)	_____	months	x	\$20.00	=	\$_____	<i>or</i>
Temporary Business Fee (daily)	_____	days	x	\$1.00	=	\$_____	<i>(\$75.00 max)</i>
				TOTAL DUE		\$_____	

SECTION D - ADDITIONAL ITEMS REQUIRED FOR APPLICATION PROCESSING:

1. Certified BCI Criminal history report for the applicant named in Section B.
2. A photograph of the applicant taken within six months prior to submission of the application, one and one-half inches by one and one-half inches (1-½" x 1-½") in dimension and showing the applicant's head and shoulders, OR a picture taken by the City at the time of application approval.
3. If the applicant is employed by another person or business entity, documents showing that the person or entity is authorized to do business in the State of Utah.
4. If the applicant desires to sell foodstuffs, a statement by a reputable physician licensed in the State of Utah, dated not more than ten (10) days prior to the date of application submission, certifying the applicant to be free of infectious, contagious, or communicable diseases.

FOR OFFICIAL USE ONLY

Application/Supporting Documents Received Date: _____

Application/Supporting Documents Reviewed Date: _____

Approved Disapproved

Signature of Chief of Police: _____

License Issue Date: _____ License Valid from: _____ to _____ License No. _____

If Application Disapproved, State Reasons for Disapproval: _____