



Solicitor Application

For Certificate of Registration

Applications received after 3:00 PM will be processed the following business day.

Lindon City Business
License Division

100 N State Street
Lindon, UT 84042
801-785-7687
www.lindoncity.org

SECTION I: Business Information - please type or print clearly. Complete all lines- enter N/A if not applicable.

- A. True/Correct Legal Name of Solicitor: _____ Contact Phone No. _____
- B. All former names/aliases used by Applicant in last 10 years: _____
- C. Business Entity # / DBA _____ Commerce Entity No. _____
- D. Applicant - Date of Birth: _____ Applicant State Driver License/ID Card No. _____ State _____
- E. Applicant Home Address: _____ (Street, City, State, Zip)
- Applicant Mailing Address: _____ (Street, City, State, Zip)
- F. If different from Applicant, Responsible Party Name: _____ Ph. No. _____
- Address _____ (Street, City, State, Zip)
- G. Address for Notices: _____ (Street, City, State Zip)

SECTION II: Items required with application

- ☐ BCI Report less than 180 days old (Utah resident), or equivalent report from applicant's home state if not Utah resident.
- ☐ Proof of identification (one of the following):
- Valid State-issued Driver License or Identification Card
 - Valid Passport issued by U.S.A. or any Foreign Country
 - Valid U.S.A. Military Identification Card
- ☐ Waiver for City Enforcement Purposes
- ☐ Any Licenses/permits required to transact this business

SECTION III: Goods or services offered

SECTION IV: Written Disclosures

I have received and reviewed the disclosure information required by Lindon City Municipal Code Section 5.40.080, included with the entire Solicitor Code.

Applicant Signature _____ Date _____

SECTION V: Disqualifying Status Questions - Affirm or Deny each of the following statements.

ANY AFFIRMATIVE RESPONSE IN SECTION V OF THIS APPLICATION RENDERS THE APPLICANT DISQUALIFIED FROM CERTIFICATION

I have been criminally convicted for:

1. Felony homicide: _____ 2. Sexual assault of any kind: _____
3. Physically abusing, sexually abusing, or exploiting a minor: _____
4. Sale or distribution of controlled substance: _____

I have been criminal charges currently pending for:

1. Felony homicide: _____ 2. Sexual assault of any kind: _____
3. Physically abusing, sexually abusing, or exploiting a minor: _____
4. Sale or distribution of controlled substance: _____

I have had a criminal felony conviction within last 10 years: _____

I was incarcerated in federal or state prison in last 5 years: _____

I was criminally convicted of a misdemeanor in last 5 years involving:

1. A crime of moral turpitude: _____
2. Violent or aggravated conduct with persons or property: _____

I have a Final Judgement entered against me in the last 5 years for:

1. Engaging in fraud or intentional misrepresentation: _____
2. A debt that was non-dischargeable in bankruptcy: _____

I am now on parole/probation to any court, penal institution, or govt. entity, including being under house arrest or subject to a tracking device: _____

I have an outstanding arrest warrant from any jurisdiction: _____

I am now subject to a protective order for physical or sexual abuse: _____

SECTION VI: Waiver Statement and applicant acknowledgement of written disclosures and disqualifying status

I, the undersigned, do hereby verify, under penalty of perjury, that the information provided herewith is complete, truthful and accurate to the best of my knowledge and belief. I do hereby agree to allow the City to obtain a name/date of birth BCI background check for enforcement purposes of the Lindon Municipal Code, Chapter 5.40. I agree to conduct business in complete accordance with all laws, ordinances, and regulations governing operation of such business. I acknowledge that soliciting without a valid certificate in plain view may result in revocation of such and/or citation. I understand that once the certificate of registration is issued, it becomes invalid if any of the application information changes and a new application will be required to update the information on record.

Signature of Applicant

Date

Approval of City Business License Officer

Date