

GATEWAY TO ALL SEASON FUN

TOWN OF DEL NORTE

140 SPRUCE STREET
P.O. BOX 249
DEL NORTE, CO. 81132



PHONE NO. (719) 657-2708
FAX NO. (719) 657-2035

Door to Door Peddlers, Solicitors, and Transient Merchant Application

Please fill out the application below. A copy of your Colorado State Sales Tax License or Special Event License and an recent passport style photograph (2x2" showing head and shoulders) but also be provided at the time this application is submitted. Applicants must also have their fingerprints taken. Residents not of Rio Grande County or who represent a firm whose principal place of business is located outside the State, must file a surety bond running to the Town of Del Norte in the amount of \$1,000 with the City Clerk. Fee \$200.00

Name of Organization: _____ Date ____ / ____ / ____

Name: _____ Phone: (____) ____ - _____

Hair Color: _____ Eye Color: _____ Height: _____ Weight: _____

Other Distinguishing marks: _____

Local Address: _____

Nature of business or goods to be sold: _____

Address from which proposed sales will be made: _____

Name of employer: _____

Address of the employer: _____

Credential establishing the exact relationship: _____

Date soliciting will state: ____ / ____ / ____ Date soliciting will end: ____ / ____ / ____

Source of Supply: _____

Where goods are located now: _____

Method of delivery: _____

Have you ever been convicted of a crime, misdemeanor, or violation of any municipal ordinance other than traffic violations?

No Yes If yes, please list all offenses, punishment, or penalty assessments. Additional pages may be requested.

1. _____
2. _____
3. _____
4. _____
5. _____

If applicable please list the last 3 locations (cities, towns, etc.) where you carried out business and the address from which such business was conducted in those municipalities.

1. _____
Address: _____
2. _____
Address: _____
3. _____
Address: _____

Please give two references:

Name: _____ Name: _____
Occupation: _____ Occupation: _____
Relationship: _____ Relationship: _____
Phone Number: (____) ____ - _____ Phone Number: (____) ____ - _____
E-mail: _____ E-mail: _____
Address: _____ Address: _____

I DECLARE UNDER PENALTY OF PERJURY OF LAW THAT THIS APPLICATION AND ALL ATTACHMENTS ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE

_____ Date ____ / ____ / ____
Signature

OFFICIAL USE ONLY

Bond Status

Please check one:

Not Required Bond Required

Fee amount: \$ _____ Date submitted: ____ / ____ / ____

Fingerprint Status

Date taken: ____ / ____ / ____

Date Submitted: ____ / ____ / ____

Result, please check one:

Approved Disapproved