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

SOLICITORS BUSINESS LICENSE APPLICATION

SECTION A - BUSINESS INFORMATION

Business Name: _____ DBA: _____

Business Address: _____

Manager Name: _____ Phone: _____

Email: _____

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

- **Has any manager/owner of this company been convicted of any crime, misdemeanor, or violation of any municipal ordinance?** Yes ☐ No ☐ **If yes, state the nature of the offense, the date of conviction, and the punishment or penalty:** _____
- **Is this business authorized to operate in the State of Utah?** _____
- **Is the applicant listed below authorized to represent this business as requested?** _____

SECTION B - APPLICANT INFORMATION

Applicant's Name: _____ Phone: _____

Applicant's Home Address: _____

Applicant's email Address: _____

- **Have you 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:** _____

_____

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:

There is a 10-day waiting period before business may begin:

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.)

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: _____

Phone: _____

SECTION C - FEES

Solicitor/Temporary License Fees:

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

SECTION D - ADDITIONAL ITEMS REQUIRED FOR APPLICATION PROCESSING:

☐ Recent certified BCI Criminal history report for the applicant named in Section B.

☐ 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.

☐ 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: _____ Photo taken: _____

Application/Supporting Documents Reviewed Date: _____

Signature of Business License Official: _____ ____ Approved ____ Denied

Signature of Chief of Police: _____ ____ Approved ____ Denied

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

If Application Denied, State Reasons: _____

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