



City of Tombstone

Office of the City Clerk

P.O. Box 339 *107 E. Toughnut Street*
Tombstone, AZ 85638

Phone (520) 457-2202 e-mail: cityclerk@cityoftombstone.com Fax (520) 457-3516

SOLICITORS LICENSE

Enclosed is the Application for a Solicitors License for the City of Tombstone. This license is meant only for solicitors. Please expect a minimum of 15 workings days for approval.

This application must be completed in its entirety. You must submit the following information.

BUSINESS NAME

- _____ **Finger Printing:** Processed through the Marshal's Dept. (**\$20.00**)
- _____ **Identification:** Copy Drivers License
- _____ **Credentials:** Proof that person is authorized to act as representative of firm or business.
- _____ **Bond:** Cash Deposit (**\$1000.00**) or Bond executed by two or more good and sufficient sureties or by a surety company authorized to become surety on such bonds in the State.
- _____ **Solicitors License Fee:** Per quarter (**\$35.00**)

Note: Solicitation will take place behind barricades, in the closed portion of Allen Street. No solicitation will be permitted on any sidewalks, boardwalks, handicap accessibility ramps or in front of any business.

APPLICATION FOR A SOLICITORS LICENSE

Requested Time Period: From: _____ to _____

Name: _____
 (First) (Middle) (Last)

Social Security Number: _____

Physical Address: _____

Mailing Address: _____

Phone Number: _____

Employed By: _____

Employer Address: _____

Employer Phone Number: _____

Employee Title / Position: _____

Business Description: _____

Name and Address to whom and where Bond is to be returned: _____

Have you ever been convicted of any crime, misdemeanor or violation of any municipal ordinance? If yes, explain: _____

Have you applied for a Solicitors License with the City of Tombstone previously or been associated with a licensee in the past? Yes () No (). If yes, under what name was the license issued? _____

CERTIFICATION OF APPLICANT

(Read your answers carefully before signing below)

I hereby certify that all answers on this application are true and that any misstatement or omission of material facts may be cause for refusal of license. I understand that this license is issued contingent to the required investigation as per Section 4-3-19 of the Tombstone City Code and that it can be revoked for proper cause.

DATE: _____ SIGNATURE: _____

POLICE INVESTIGATION:

APPROVAL: _____ DISAPPROVAL: _____