

City of Alamogordo

Commercial Solicitor's License Application

Authority: Alamogordo Code of Ordinances, Chapter 17

Fees: The first application of the calendar year per solicitor is Fifty dollars (\$50.00) and is valid for thirty consecutive days. Each additional application for the same solicitor within the same calendar year is an additional Twenty-five dollars (\$25.00) and is valid for an additional thirty consecutive day period. There will be no credits or refunds.

Instructions: All questions on this application must be answered completely. Write N/A if an item is not applicable to you or your business. This application must be signed, notarized, and sworn to under oath by the Applicant/Solicitor. Minors under the age of 18 are exempt from these licensing requirements except when they are acting as agents of adults covered by the requirements. Picture identification will be required to prove identity and residence address.

Name: _____ Telephone #: _____

Age: _____ Date of Birth: _____ Social Security #: _____

Address: _____ Mailing Address: _____

City/State/Zip: _____ City/State/Zip: _____

Driver's License #: _____ State Driver's License Issued: _____

Business Name: _____ Telephone #: _____

Address: _____

City/State/Zip: _____

NM Tax Identification #: _____

If Applicant/Solicitor is employed or acting on behalf of another, complete the following:

Name of Employer: _____ Employer's Telephone #: _____

Employer Address: _____

City/State/Zip: _____

Employer's NM Tax ID #: _____

Describe the nature, character, and quality of the goods, merchandise or services to be sold:

PLEASE ALLOW 7 WORKING DAYS FOR THIS APPLICATION TO BE PROCESSED.

The undersigned, being first duly sworn upon oath states that:

1. I have received a copy of Chapter 17, Article 17-08 relating to Commercial Solicitors, and I fully understand the same;
2. I will carry, appropriately display, and show to any requestor the License issued to me by the City Clerk while engaging in business.
3. I will wear the identification badge provided to me by the City Clerk while performing business in such a way that it is readily visible.
4. I will keep currently informed of all persons and/or addresses on the No-Solicitors Roster and will refrain from contacting those persons upon penalty of the law.

PLEASE READ AND SIGN THE STATEMENT BELOW: (*Unsigned applications will be discarded and will not be approved; all applications must be signed by the applicant ONLY.*)

The facts set forth in my application are true and complete to the best of my knowledge. I understand that false statements on this application shall be considered sufficient cause for denial. I authorize the City of Alamogordo to obtain civil suit, criminal arrest, and driving record information about me from law enforcement agencies, courts of law, and motor vehicle departments, of any state which I reside, have resided, or in which records may exist.

Signature of Applicant/Solicitor

Date

COUNTY OF OTERO }
 }ss
STATE OF NEW MEXICO }

Subscribed and sworn to before me by _____ this _____ day
of _____, 20____.

My commission expires: _____

Notary Public

City Clerk Approval. _____

APPROVED/DENIED

City Manager

Date

REVIEWED BY:

Police Department

Date

Comments _____

City Clerk's Office Use Only

New \$50.00 or Reissue \$25.00 (circle one)

License #: _____

Receipt #: _____

Date Fee Paid: _____