



# CITY OF CAÑON CITY

**City Clerk**

P.O. Box 1460 • 128 Main Street  
Cañon City, CO 81215-1460  
(719) 269-9011 • [www.canoncity.gov](http://www.canoncity.gov)

## Commercial Solicitor:

☐ **New License** ☐ **Renewal License**

Applications must be completed in full. Return applications to the City

### Applicant Information

<b>Applicant Name:</b>	<b>Physical Address</b>
<b>Company Name and Location:</b>	<b>Mailing Address:</b>
<b>Phone Number with Area Code:</b>	<b>E-mail address:</b>

### Checklist of required items

- \_\_\_\_\_ **Application**
- \_\_\_\_\_ **Fee (\$100 new/\$50 renewal for Peddlers License)**
- \_\_\_\_\_ **Proof of Citizenship or proof that an applicant is legally able to work in the United States.**
- \_\_\_\_\_ **Copy of Driver's License or Identification card.**

Please return application and all required documents to: City of Cañon City, Attention City Clerk, P.O. Box 1460, Cañon City, CO 81215-1460. If you have any questions please call 719.276.5242 Thank You.

**All Business Licenses expire on December 31st of the year that it was issued.**

**Have you ever been convicted of any crime or ordinance violation (other than minor traffic violations) during the last 10 years?      Yes      No**

**\*If yes, state date and nature offense:**

**\*Place where offense occurred:**

**\*Date of conviction:** \_\_\_\_\_

**\*Court** \_\_\_\_\_

**\*Penalty Imposed** \_\_\_\_\_

**\*Date requirements of penalty satisfied:** \_\_\_\_\_

**\*Are you currently on parole or probation for any criminal violation(s):** Yes      No

If so, please provide details (including date probation/parole will be satisfied and probation/ parole officer's contact information): \_\_\_\_\_

**\*Are you required to register as a "convicted sex offender" pursuant to 16-22-103, C.R.S.?**

Yes      No

If yes, why? \_\_\_\_\_ Where & with what agency are you registered?: \_\_\_\_\_

**Have you ever applied for and received a Door-to-Door sales permit?**  
Yes      No

If so, please identify other communities in which you have been permitted or licensed. Include contact information for each permit or licensing authority from whom you have held a permit/ license. \_\_\_\_\_

Please provide a brief description of the merchandise to be sold or other activity that requires a license and permit pursuant to the Cañon City Municipal Code. Applicant may attach copies of promotional sales brochures to satisfy this requirement: \_\_\_\_\_

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**Statement of Release and Affirmation:**

I hereby authorize the City of Cañon City to investigate my background and qualifications for purposes of determining whether I am qualified for the business license for which I am applying.

By submitting this application, I understand and acknowledge that the City Clerk's Office may request other relevant information in connection with this application. Failure to provide the requested information may result in denial of this application. I also acknowledge and understand that the City Clerk's Office cannot accept an application unless it is accompanied by the required fees and documentation.

I declare under penalty of perjury that this application and all attachments are true, correct and complete to the best of my knowledge and that I have read and will adhere to and will require my employees to adhere to all regulations set forth herein and within the Cañon City Municipal Code Title 5 governing Business Licensure.

Full Name Printed

Full Name Signature

Date:

Job Title: