BOISE CITY

VENDOR / SOLICITOR LICENSE
INFORMATION

INSURANCE & BOND REQUIREMENTS

A **SURETY BOND** IN THE AMOUNTOF **$1,000.00 PER PERSON, OR $5,000.00 FOR A COMPANY** MUST BE SUBMITTED WITH **EACH** COMPLETED APPLICATION TO:

BOISE CITY CLERK'S OFFICE
150 N. CAPITOL BLVD.
BOISE, ID 83701

OUT OF STATE APPLICANTS

ALL **OUT OF STATE** APPLICANTS **MUST** PROVIDE A COPY OF THEIR **DRIVER'S LICENSE** OR **STATE IDENTIFICATION CARD**, ALONG WITH THE BOISE CITY VENDOR / SOLICITOR APPLICATION.

FOOD & DRINK APPLICANTS

IF YOU SELL FOOD ITEMS YOU MUST CONTACT **CENTRAL DISTRICT HEALTH DEPARTMENT, 327-7499** FOR A HEALTH CERTIFICATE. THEN PURCHASE AN **EATING AND DRINKING LICENSE** FROM BOISE CITY CLERK'S OFFICE.

ALL TRASH AND DEBRIS ACCUMULATING WITHIN TWENTY (20) FEET OF ANY VENDING STAND SHALL BE COLLECTED BY THE VENDOR. ALL VENDORS SELLING FOOD OR BEVERAGES MUST PROVIDE TRASH RECEPTACLES ADJACENT TO OR AS PART OF THEIR STANDS.

LOCATION RESTRICTIONS

CARTS, STANDS AND VEHICLES ARE **PROHIBITED WITHIN FIFTEEN (15) FEET** OF A FIRE HYDRANT, FIRE ESCAPE, BUS STOP, LOADING ZONE OR DRIVEWAY OF A FIRE STATION, POLICE STATION, HOSPITAL, OR BOISE CITY PARKS AND / OR GREENBELT.

UNLESS OTHERWISE PROVIDED, MOBILE VENDING CARTS, TRAILERS, OR VEHICLES **SHALL NOT BE PLACED WITHIN FIFTY (50) FEET** OF ANOTHER MOBILE VENDING CART, TRAILER, VEHICLE OR **IDENTIFIED VENDING LOCATION MARKER**.

IF YOU OPERATE ON ANY PUBLIC ROADS OR SIDEWALKS YOU AND YOUR CUSTOMERS SHALL NOT BLOCK PEDESTRIAN OR VEHICULAR TRAFFIC. QUESTIONS REGARDING WHETHER A ROAD OR SIDEWALK IS PUBLIC SHOULD BE DIRECTED TO THE **ADA COUNTY HIGHWAY DISTRICT AT 387-6100.**

IF YOU DESIRE TO PLACE YOUR OPERATION IN THE BOISE CITY PARKS AND / OR GREENBELT, YOU MUST CONTACT **BOISE CITY PARKS & RECREATION DEPARTMENT** LOCATED AT: **1104 ROYAL BLVD., BOISE, IDAHO, TELEPHONE NUMBER: 384-4060.**

NEXT PAGE PLEASE

BOISE CITY

VENDOR / SOLICITOR
LICENSE APPLICATION

OFFICE USE ONLY

DATE_____**CITY LICENSE #** _____

❑ **NEW** ❑ **RENEWAL**

❑ **BOND**

ALL FEES ARE NON REFUNDABLE:

SEMI-ANNUAL LICENSE . . . . . $ 51.50
ANNUAL LICENSE. . . . . .$ 103.50
PHOTO . . . . . $ 5.00
PROCESSING . . . . . .$ 1.50
FINGERPRINTS . . . . $ 42.00
JUVENILE BACKGROUND CHECK . . . . . $ 5.00

A BOND in the amount of $1,000.00 per person or $5, 000.00 per company is required with each application.

TOTAL FEES DUE . . . . . ._____

Do you have any outstanding criminal charges pending against you? ❑ **YES** ❑ **NO** **If Yes, STOP.**

You must speak to a License Enforcement Officer before completing this application.

APPLICANT NAME_____PHONE _____
First Last

RESIDENCE ADDRESS _____
Street City Zip

MAILING ADDRESS _____
(IF DIFFERENT FROM ABOVE) Street City Zip

EMAIL ADDRESS _____

HAVE YOU BEEN A RESIDENT OF THE STATE OF IDAHO FOR AT LEAST THREE (3) YEARS? ❑ YES ❑ NO

BUSINESS NAME_____BUSINESS PHONE_____

COMPANY ADDRESS_____
Street City Zip

DESCRIBE THE GOODS TO BE SOLD, SOLICITATIONS TO BE CONDUCTED AND MANNER OF DELIVERY:

_____

LIST OTHER CITIES, COUNTIES AND STATES WHERE YOU HAVE BEEN LICENSED TO DO THIS TYPE OF BUSINESS:

_____

OVER

SELF DECLARATION STATEMENT

YES*	NO	
____	____	HAVE YOU BEEN CONVICTED OF A VIOLATION OF ANY MUNICIPAL, STATE OR FEDERAL LAWS, EXCEPT FOR MINOR TRAFFIC VIOLATIONS, IN THE PREVIOUS FIVE YEARS? IF YES, GIVE OFFENSE(s), DATE(s) AND LOCATION(s)
____	____	HAS ANY VENDOR OR SOLICITOR LICENSE ISSUED TO YOU, BY THIS CITY, OR ANY OTHER MUNICIPALITY BEEN SUSPENDED OR REVOKED WITHIN THE PAST FIVE YEARS? IF YES, GIVE TYPE OF LICENSE, DATE AND LOCATION

IN ACCORDANCE WITH BOISE CITY CODE 5-12-06 C., **THE ABOVE OFFENSES / CONDITIONS ARE REASONS FOR DENIAL OF A VENDOR OR SOLICITOR LICENSE.**

_____ I HEREBY AUTHORIZE THE CITY OF BOISE, ITS AGENTS AND EMPLOYEES TO SEEK INFORMATION AND CONDUCT AN INVESTIGATION INTO THE TRUTH OF THE STATEMENTS SET FORTH IN THIS APPLICATION.

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STATEMENT OF OATH

I swear and affirm, under penalty of perjury pursuant to Title 18, Chapter 54 Idaho Code, that the statements contained in the above application for a Vendor or Solicitor license are true and correct to the best of my knowledge.

_____ Date _____
SIGNATURE OF APPLICANT

STATE OF IDAHO
> ss
COUNTY OF ADA

On this_____day of_____in the year_____, before me the undersigned, a Notary Public, personally appeared _____known or identified to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he / she executed the same.

_____
NOTARY PUBLIC FOR IDAHO
SEAL RESIDING AT_____, IDAHO
MY COMMISSION EXPIRES_____

I,_____, PARENT / LEGAL GUARDIAN NAME (Please Print) HEREBY GIVE CONSENT TO THE CITY OF BOISE TO CONDUCT AN INVESTIGATION INTO THE MINOR APPLICANT'S QUALIFICATIONS TO RECEIVE A BOISE CITY VENDOR OR SOLICITOR LICENSE AS PROVIDED BY BOISE CITY CODE TITLE 5, SECTION 12. WE UNDERSTAND THAT THIS INVESTIGATION MAY INCLUDE A CRIMINAL HISTORY INQUIRY.

_____ Date _____
SIGNATURE OF PARENT OR GUARDIAN
(FOR JUVENILE WORKER ONLY)

STATE OF IDAHO
> ss
COUNTY OF ADA

On this_____day of_____in the year_____, before me the undersigned, a Notary Public, personally appeared _____and proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged that he / she executed the same.

_____
NOTARY PUBLIC FOR IDAHO
SEAL RESIDING AT_____, IDAHO
MY COMMISSION EXPIRES_____