



APPLICATION FOR PRIVATE SECURITY SERVICE

1551 N. 17th Avenue
Greeley, CO 80631

970-350-9627
970-304-6505 fax

GENERAL INFORMATION

1. Name of business: _____
2. Trade name of establishment (d/b/a): _____
3. Address of premises: _____
4. Business telephone: _____
5. Applicant is a:
 Sole Proprietorship Partnership
 Corporation Limited Liability Company

SOLE PROPRIETORSHIP INFORMATION

6. If sole proprietorship, list name, address, and date of birth of proprietor: _____

PARTNERSHIP INFORMATION

7. If partnership, list name, address, and date of birth of partners: _____

LIMITED LIABILITY INFORMATION

8. If limited liability company, list name, address, and date of birth of members and manager. _____

PAWBROKER APPLICATION INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected

ALL INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected

CORPORATION INFORMATION

9. If corporation, list name: _____

10. If corporation, list names, addresses, and dates of birth of:

President _____

Vice-President _____

Treasurer _____

Secretary _____

Director _____

Director _____

11. List all stockholders owning 10% (or more) of the issued stock:

Name	Address	Date of Birth	Position
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. If stock is pledged, state name and address of person or entity to whom pledged and terms thereof. If additional space is needed, use separate sheet. Attach copies of articles of incorporation and certificate of good standing from the State of Colorado. (If new corporation, attach certificate and articles of incorporation and organizational minutes.)

13. List any other persons who have a direct or indirect financial interest in this business and the percentage of their interest: _____

ALL INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected

OTHER INFORMATION

14. Has any officer, director or partner of the company ever been convicted of any felony, misdemeanor or ordinance violation involving moral turpitude or a breach of peace?

() Yes () No If yes, list nature of the offense, penalty or punishment imposed, and the date and place where such offense occurred

15. Has a judgment or conviction for fraud, deceit or misrepresentation ever been entered against the applicant, manager, partner, officer, director, or stockholder?

() Yes () No If yes explain.

16. Description of the nature and type of business to be conducted or services to be offered and the area expected to be covered in the conduct of business.

17. Number of persons to be employed as agents or employees. _____

18. A statement as to the number and type of vehicles to be used in the conduct of the business.

19. Description of uniforms; color, badges, insignia: _____

20. A description of any other equipment to be used in conducting the business. _____

Signature: _____ Date: _____



APPLICATION FOR LICENSE

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AUTHORITY FOR RELEASE OF INFORMATION

Name _____
(Last) (First) (Middle)

Sex _____ Date of Birth _____
Month/Day/Year

I, _____, do hereby authorize a review and full disclosure of all records specified below, or any part thereof, concerning myself, by and to ANY duly authorized agent of the City of Greeley, Greeley Police Department, or Private investigator working as an agent of the City of Greeley for purposes of the application, whether the said records are of Criminal Justice, public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of financial or credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records; records of complaint of a civil nature made by or against me, whosesoever located.

I understand that all information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for licensing by the City of Greeley, Finance Department. I understand that all materials pertaining to this background investigation become the property of the City of Greeley, Finance Department and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is not approved, the sources of confidential information will not be revealed to me.

A photocopy of this signed release form will be considered valid as an original hereof.
MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Affiant's Signature

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

Seal) Notary Public

Expiration Date

(Notary



AFFIDAVIT OF LAWFUL PRESENCE

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen, or
- * I am a Permanent Resident of the United States, or
- * I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute § 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date

*If Affiant affirms that he/she is either a Permanent Resident or otherwise lawfully present in the United States, please have Affiant complete the S.A.V.E. verification form and forward both forms to H.R. for verification of lawful presence in the S.A.V.E. program.

For internal use only:

IDENTIFICATION PROVIDED

- Current Colorado Driver’s License or Permit
- United States passport
- Current Colorado Identification Card Issued by Department of Motor Vehicles
- United States Military ID/Common Access Card
- United States Military Dependent Identification Card
- United States Coast Guard Merchant Mariner Card
- Native American Tribal Document
- Out of State DL/ID from any state except Alaska, Illinois, New Mexico, Utah, or Washington.
- Out of State DL/ID that says “Enhanced”
- Foreign passport with photo, US Visa, I-94
- Certificate of Naturalization w/photo less than 20 years old
- Certificate of Citizenship w/photo less than 20 years old

For internal use only:

ALTERNATE I.D. REQUIREMENTS

If applicant cannot produce one of the identification documents listed at left, please refer to Attachments A and B of the Department of Revenue’s “Rules for Evidence of Lawful Presence” located at U:\City Attorney\Immigration

Questions? Contact the City Attorney’s office.



S.A.V.E. VERIFICATION FORM

Pursuant to Section 24-76.5-103 of the Colorado Revised Statutes, the City of Greeley must verify that individuals who apply for public services from the City are lawfully present in the United States. If an Applicant executes the Affidavit stating that he or she is an Alien lawfully present in the United States, the City of Greeley must verify such lawful presence through the federal Systematic Alien Verification of Entitlement program ("SAVE program"). This verification program is operated by the United States Department of Homeland Security.

The following information is required in order for the City to perform the SAVE program verification. In addition, please affix to this form a legible copy of your identification or other documentation which demonstrates lawful presence in the United States.

Name _____

Telephone Number _____

Social Security Number _____

Date of Birth _____

- City Benefit requested:**
- Food Tax Rebate
 - Water and Sewer Department Rebate
 - Commercial/Professional License
 - Liquor License
 - Loan (including Historic Preservation loans)
 - Grant
 - Emergency Assistance

For internal use only:
 Requesting Department _____
 Staff contact _____

Forward the Affidavit, SAVE Verification form, and copy of appropriate identification documents to H.R.

H.R. use only:

- S.A.V.E. verification performed
 - Affiant is lawfully present in the United States
 - Affiant is not lawfully present in the United States
- Documents returned to originating Department.