



DOOR TO DOOR SOLICITATION APPLICATION
CITY OF PENDLETON

500 SW DORION AVE.
PENDLETON, OR 97801
OFFICE: (541) 966-0207 **FAX:** (541) 966-0231

BUSINESS NAME/DBA: _____

BUSINESS LOCATION: _____

FEDERAL EMPLOYER ID#: _____ BUSINESS TELEPHONE: (____) _____

Please provide the following information for all persons involved in business if more room is needed provide on separate sheet:

NAME: _____

ADDRESS: _____

ADDRESS IN PENDLETON: _____

TELEPHONE: (____) _____ SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ STATE OF BIRTH: _____

DRIVERS LICENSE NUMBER: _____ STATE: _____

NAME: _____

ADDRESS: _____

ADDRESS IN PENDLETON: _____

TELEPHONE: (____) _____ SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ STATE OF BIRTH: _____

DRIVERS LICENSE NUMBER: _____ STATE: _____

NAME: _____

ADDRESS: _____

ADDRESS IN PENDLETON: _____

TELEPHONE: (____) _____ SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ STATE OF BIRTH: _____

DRIVERS LICENSE NUMBER: _____ STATE: _____

PERIOD OF SOLICITATION: FROM: _____ TO: _____

AREAS OF THE CITY TO BE SOLICITED: _____
NAME, ADDRESS, AND TELEPHONE NUMBER OF ORGANIZATION DESIGNATED TO RECEIVE ADVICE FROM THE
CITY: _____

You Must Provide Proof of Liability Insurance

I, _____, understand that there is a ten day review period for this application and that if any of the above information is found to be false or misleading, the license shall be revoked.

Signature _____

Date signed: _____

FEE CALCULATION	
FOR BUSINESSES WITH A PERMANENT LOCATION WITHIN THE CITY LIMITS:	
Check the following as they apply	FEE
Base Fee : w/Five or fewer (0-5) Full-Time Equivalent (FTE) employees (\$100.00 Business License Fee & \$50.00 Investigation Fee)	<u>\$150.00</u>
Additional Fee: Employee (6-49): # of FTE employees _____ times \$20.00 *	<u>\$</u>
Fifty or more FTE employees **	<u>\$1050.00</u>
FOR BUSINESSES WITHOUT A PERMANENT LOCATION WITHIN CITY LIMITS:	
Base Fee: w/Five or fewer (0-5) Pendleton FTE employees (\$160.00 Business License Fee & \$50.00 Investigation Fee)	<u>\$210.00</u>
Additional Fee: Employees (6-49): # of Pendleton FTE employees _____ times \$20.00 *	<u>\$</u>
Fifty or more Pendleton FTE employees **	<u>\$1050.00</u>

*How to figure FTE: If you know your total number of labor hours for one year: Divide by 2080. This is your FTEs.
FTEs do NOT mean number of employees.

**Maximum Business License Fee for any Business is \$1,000

FOR OFFICE USE ONLY		
	Account: 110-43110 (BLING) \$100 or \$160 110-43130 (BLINV) \$50 255-43111 (BLEMP) Addnl Fee	
Date Application Received:		
Amount Paid:	Receipt #:	Initials:
Exempt: (Check reason) _____ Nonprofit _____ Enterprise Zone		
<u>Approvals by Department Heads</u>		
Building/Planning: _____	Police: _____	
Comments: _____ _____ _____		
Date Application Approved: _____	Denied: _____	
Date License Mailed: _____	Denial Letter Mailed: _____	
License #: _____	Refund Check #: _____	