

SELLER REGISTRATION APPLICATION TELEPHONE SOLICITING	OFFICE USE ONLY
Annual Application fee: \$500.00 (non-refundable) Initial Background Check Fee: \$20.00 per person (non-refundable)	Date Issued: Registration Number:
Please make application fee check or money order payable to the State of Utah .	Approved: Denied:
Applicant's Business Name	Expiration: Surety Expires:
Date of Application	Receipt Number:
Initial Application Renewal Applic	ation Amended Application

Important notice regarding business confidentiality claims pursuant to the Government Records Access and Management Act: If you wish to make a claim of business confidentiality with respect to any information in this application or with respect to records you provide to the Division, please be aware of the following law: "Any person who provides to a governmental entity a record that the person believes should be protected under 63G-2-305(1) [trade secrets] or (2) [commercial information or non-individual financial information] or both Subsections 63G-2-305(1) and (2) shall provide with the record: (A) a written claim of business confidentiality; and (B) a concise statement of reasons supporting the claim of business confidentiality.

> If you have any questions, please contact the Division at (801) 530-6601. **Please make application fee payable to the State of Utah.** Please return the completed application form to:

> > Department of Commerce Division of Consumer Protection 160 East 300 South P.O. Box 146704 Salt Lake City, Utah 84114-6704

INSTRUCTIONS

For easier completion, this form is available on the Division of Consumer Protection's website, http://dcp.utah.gov, and can be viewed, filled in, and printed from your computer. If you are not completing this form online, please type or legibly print in black or blue ink. The completed form can be mailed to the Utah Division of Consumer Protection, P.O. Box 146704, Salt Lake City, UT 84114-6704. This form shall not be altered.

The Telephone Fraud Prevention Act, Utah Code § 13-26-3(1)(a) requires that:

(1)(a) . . . [E]ach seller shall register annually with the division before engaging in telephone solicitations if:

(i) the seller engages in telephone solicitations that:

- (A) originate in Utah; or
- (B) are received in Utah; or

(ii) the seller, or a solicitor on behalf of the seller, conducts any business operations in Utah.

Complete this application in full. Leaving a question blank or writing in "N/A" is not an acceptable answer. Each question requires a response with an explanation or a number including 0.

CHECKLIST

- \Box Complete the Registration Form (page 3).
- □ <u>Exhibit A</u>: Participant disclosures and fingerprint process.
 - Disclosure of all participants including any felony or misdemeanor convictions. A
 participant means a seller, an owner, an officer, a director, a member or manager of a
 limited liability company, a principal, a trustee, a general or limited partner, a sole
 proprietor, or an individual with a controlling interest in an entity.
 - 2. Disclosure of judgements, orders, or other convictions.
 - 3. Attached completed fingerprint card(s) for background check(s).
- □ <u>Exhibit B</u>: Previous businesses, current DBA's, and other licenses, permits, and registrations.
 - 1. Disclosure of all previous businesses over the last ten years.
 - 2. Disclosure of all current DBA's.
 - 3. Disclosure of all licenses, permits, and/or registrations currently held.
 - 4. Disclosure of all licenses, permits, and/or registrations denied, revoked, or suspended.
- Exhibit C: Registered Agent.
 - 1. Your Registered Agent's information.
 - 2. Registered Agent's proof of residency within the state of Utah.
- □ <u>Exhibit D</u>: Dialing Locations, Goods and Services, and Scripts and Rescission Rights.
 - 1. Identify all locations where telephone solicitations will be made or received.
 - 2. Identify telecom provider(s).
 - 3. A detailed description of the goods or services that are subject to the telephone solicitation.
 - 4. Copies of all telephone scripts utilized and disclosure of the three day right to cancel.
 - 5. Disclosure of any website the applicant uses in connection with a telephone solicitation.
 - 6. Disclosure of all merchant accounts.
- □ <u>Exhibit E</u>: Surety Compliance.
- □ Exhibit F: Information you need to know
- □ Check for \$500.00 (non-refundable) payable to the State of Utah.
- □ Check for \$20.00 (non-refundable) for each fingerprint card attached to this application payable to the State of Utah.

REGISTRATION FORM

COMPLETE ALL PORTIONS OF THIS FORM AND INCLUDE THE REQUIRED EXHIBITS. INCOMPLETE APPLICATIONS MAY BE REJECTED OR DENIED.

Please provide the name and contact information for the person the Division should contact regarding this filing:

	Contact Person Name				
	Street Address				
	City	S	otate	Zip Code	
	Telephone Number	Fax Number		Email Address	
Please	e provide the name and co	ntact information for t	he applicant		
	Full Business Name				
	Fuil Business Name				
	Street Address				
	City	S	State	Zip Code	
	Mailing Address				
	City	S	state	Zip Code	
	Telephone Number	Fax Number		Email Address	

Identify the applicant's business type and attach supporting documentation:

- Corporation: Attach Articles of Incorporation
- Limited Liability Company: Attach Articles of Incorporation
- General Partnership: Attach copy of Partnership
- Limited Partnership: Attach copy of Partnership
- Sole Proprietorship: Attach copy of fictitious business name filing
- Or attach other organizational documentation showing applicant's current legal status.

EXHIBIT A

1. Participant Disclosure. Disclose all owners, officers, directors, members or manager of a limited liability company, principals, trustees, general or limited partners, sole proprietors, or individuals with a controlling interest in an entity.

Print Name	Print Name
Title	Title
Felony convictions within the last 10 years? YES NO	Felony convictions within last 10 years? YES NO
Misdemeanor within the last 10 years? YES NO	Misdemeanor within the last 10 years? YES NO
Print Name	Print Name
Title	Title
Felony convictions within the last 10 years? YES NO	Felony convictions within last 10 years? YES NO
Misdemeanor within the last 10 years? YES NO	Misdemeanor within the last 10 years? YES NO
Print Name	Print Name
Print Name Title	Print Name Title
Title Felony convictions within the last 10 years?	Title Felony convictions within last 10 years?
TitleFelony convictions within the last 10 years?YESNOMisdemeanor within the last 10 years?	TitleFelony convictions within last 10 years? YES NOMisdemeanor within the last 10 years?
Title Felony convictions within the last 10 years? YES NO Misdemeanor within the last 10 years? YES NO	Title Felony convictions within last 10 years? YES NO Misdemeanor within the last 10 years? YES NO
Title Felony convictions within the last 10 years? YES NO Misdemeanor within the last 10 years? YES NO Print Name	Title Felony convictions within last 10 years? YES NO Misdemeanor within the last 10 years? YES NO Print Name

EXHIBIT A (CONTINUED)

2. Disclosure of judgements, orders, or other convictions. Has the Applicant or any of the Applicant's owners, officers, directors, members or managing members of a limited liability company, principals, trustees, general or limited partners, sole proprietors, or an individual with a controlling interest in an entity have any judgements, injunctive orders, or convictions of racketeering or any offense involving fraud, theft, embezzlement, fraudulent conversion of property, misappropriation of property or other similar crimes?

YES NO

• If yes, provide a copy of the judgement or order and the details including:

Name of Defendant: _____ Name of Court: _____

Docket or case number: _____ Date of final order/resolution: _____

• If yes, provide a copy of the judgement or order and the details including:

Name of Defendant: ______ Name of Court: ______

Docket or case number: _____ Date of final order/resolution: _____

• If yes, provide a copy of the judgement or order and the details including:

Name of Defendant: _____ Name of Court: _____

Docket or case number: _____ Date of final order/resolution: _____

(If additional space is needed, please duplicate this page and attach to this this Exhibit.)

3. Attach a completed fingerprint card. FINGERPRINT PROCESS: To complete the criminal background check with the Division for each individual participant, please go to your local police department or the Bureau of Criminal Investigation (BCI) located at 3888 West 5400 South, Taylorsville, UT 84118 and request to be fingerprinted. You are responsible to pay any fees the police department or BCI may charge for this service. You must submit the completed fingerprint card(s) with your application to the Division.

NOTICE: BY SUBMITTING A FINGERPRINT CARD TO THE DIVISION, YOU CONSENT TO A CRIMINAL BACKGROUND CHECK BY THE BUREAU OF CRIMINAL IDENTIFICATION IN ACCORDANCE WITH UTAH CODE § 13-26-3(4)(c)(ii).

EXHIBIT B

1. Disclosure of the Applicant's or Applicant's owners, officers, directors, or principals <u>*PREVIOUS*</u> businesses over the last ten (10) years.

Prior Business Name		Owner's Name
Street Address		
City	State	Zip Code
Beginning Date		End Date
Prior Business Name		Owner's Name
Street Address		
City	Ctata	7in Cada
City	State	Zip Code
Beginning Date		End Date
Prior Business Name		Owner's Name
Street Address		
City	State	Zip Code
Beginning Date		End Date

EXHIBIT B (CONTINUED)

2. Disclose of all <u>CURRENT</u> dba's (doing business as) or trade names the Applicant business uses.

1	
2.	
3.	
4.	
5.	

(If additional space is needed, please duplicate this page and attach to this this Exhibit.)

3. Disclose the Applicant's other business licenses, permits, or registrations.

In state:			
Out of state:			

(If additional space is needed, please duplicate this page and attach to this this Exhibit.)

4. Disclose all licenses, permits, or registrations that have been denied, revoked, or suspended either in state or out of state.

Agency & State	Agency & State Docket/Case Number		Registration Type	

EXHIBIT C

1. Your Registered Agent's Information.

Please provide the name and contact information for the applicant's registered agent in the State of Utah:

Name				
Street Address				
City		State		Zip Code
Telephone Number	Fax Number		Email Address	
			Email / Gallooo	

2. The registered agent's proof of residency. Please note, your registered agent must reside in this state. The Applicant must have a registered agent designated at all times. Please attach one of the following to this exhibit:

- A current Utah driver license.
- Valid governmental photo identification issued to a resident of the State of Utah.
- Other verifiable identification indicating residency in the State of Utah.
- If agent is a corporation, attach a Certificate of Existence.

EXHIBIT D

1. Identify each location where the telephone solicitations will be made or received by the applicant or its solicitors.

City	State	Zip Code
Street Address		
City	State	Zip Code
Street Address		
City	State	Zip Code

2. Id text messaging service) to the applicant.

Provider	Name

Provider Name

Service Provided

Service Provided

Provider Name

Service Provided

(If additional space is needed, please duplicate this page and attach to this this Exhibit.)

3. Provide a detailed description of the goods and/or services that are the subject of the telephone solicitation.

(If additional space is needed, please attach a separate page to this this Exhibit.)

EXHIBIT D (CONTINUED)

4. Attach all telephone soliciting scripts the applicant uses to the back of this exhibit.

Clearly identify each telephone soliciting script, the order of the solicitation, three day right to cancel information, and number the pages.

The following information must be included in your telephone soliciting script.

In accordance with Utah Code § 13-26-5, a seller or seller's solicitor must orally advise a purchaser of the purchaser's right to cancel at the time of the solicitation. Please highlight the information below in the telephone soliciting script(s).

- □ The following language: In addition to any right to otherwise revoke an offer, you, the purchaser, may cancel this sale before midnight of the third business day after the day on which you receive the merchandise or premium, whichever is later.
- □ Instructions for how a consumer may exercise the right to cancel, including:
 - Clear disclosure that a cancellation must be made in writing.
 - The company's full mailing address.
 - The company's fax number or e-mail address.
 - Information about any refund policy that goes into effect after the three-day right to cancel ends.
 - The solicitor's true name, telephone number, and complete street address at the time of solicitation.

5. Website. Identify any website the applicant or its solicitors use in connection with the applicant's telephone solicitations.

Web Address

1.	
2.	
- -	
3.	

6. Merchant Accounts. Identify each merchant account used by the Applicant.

Merchant Account Provid	ler Name		Merchant Account Number
Provider Street Address			
City		State	Zip Code
Telephone Number	Fax Number	Err	ail Address
Merchant Account Provid	ler Name		Merchant Account Number
Provider Street Address			
City		State	Zip Code
Telephone Number	Fax Number	Err	ail Address
Merchant Account Provid	ler Name		Merchant Account Number
Provider Street Address			
City		State	Zip Code
Telephone Number	Fax Number	Err	ail Address
Merchant Account Provid	ler Name		Merchant Account Number
Provider Street Address			
City		State	Zip Code
Telephone Number	Fax Number	Err	ail Address

EXHIBIT E SURETY COMPLIANCE

1. Identify the correct Surety amount. <u>Select only one</u>. This is the surety amount to be posted in the form of a bond, irrevocable letter of credit, or certificate of deposit shall be:

- □ \$25,000 if:
 - (A) Neither the Applicant nor any affiliated person* has violated this chapter in the three-year period immediately before the day on which the seller files the application; and
 - (B) The Applicant has fewer than 10 employees total.

□ \$50,000 if:

- (A) Neither the Applicant nor any affiliated person* has violated this chapter in the three-year period immediately before the day on which the seller files the application; and
- (B) The Applicant has 10 or more employees total.
- □ \$75,000 if:
 - The Applicant or any affiliated person* has violated this chapter in the three-year period immediately before the day on which the seller files the application.

*An "affiliated person" means a seller or seller's contractor, director, employee, officer, owner, or partner.

2. Select the type of surety type and form. <u>Select only one</u>. The type of surety is either a bond, an irrevocable letter of credit, or a certificate of deposit.

□ Surety Bond – Dollar Amount \$_____

Initial registration:

- Verify that the surety company is using the bond form available on the Division's website: dcp.utah.gov. This form cannot be modified and no other bond will be accepted.
- Attach the <u>original</u> bond and power of attorney. A copy will not be accepted.
 Verify the bond is signed by both parties.
 - □ Verify the bond included the name, address, telephone number, email of agent issuing the surety bond.

Renewal registration:

- Attach the surety bond <u>continuation</u> certificate. Do not submit a <u>verification</u> certificate.
- Irrevocable Letter of Credit Dollar Amount \$_____

Initial registration:

- □ Verify that the financial institution is using the irrevocable letter of credit form available on the Division's website: dcp.utah.gov. This form cannot be modified and no other form will be accepted.
- Attach the <u>original</u> irrevocable letter of credit. The irrevocable letter of credit must be printed on the financial institution's letterhead and included the financial institution's name, address, and telephone number.

EXHIBIT E (CONTINUED)

Renewal registration: The irrevocable letter of credit is automatically extended.

□ Deposit Account Control Agreement (Certificate of Deposit) -

Dollar Amount \$_____

Initial registration:

- □ The deposit account control agreement (certificate of deposit) must be held by a financial institution located in Utah.
- Verify that the financial institution is using the Deposit Account Control Agreement form and Security Agreement form available at the Division's website: dcp.utah.gov. These forms cannot be modified and no other forms with be accepted.
- □ Attached the <u>original</u> Deposit Account Control Agreement. Please note that this form is between the seller, the financial institution, and the Division. This form must include:
 - □ The issue <u>and</u> expiration date of the deposit.
 - ☐ The name, address, and telephone number of financial institution.
- □ Attach the <u>original</u> Security Agreement. Please note that this form is between the seller and the Division only.

Renewal registration:

Attach confirmation from the financial institution indicating the deposit control agreement is continued.

EXHIBIT F INFORMATION YOU NEED TO KNOW

1. Amending the application:

If information in an application materially changes or becomes incorrect or incomplete, the Applicant shall correct the application within 30 days after the information changes or becomes incorrect or incomplete. Please note that if the company's ownership changes, a new application must be submitted. See Utah Code §13-26-3(6). A registration may be suspended or revoked if material changes are not disclosed to the Division

2. Ceasing telephone soliciting operations or closing business:

If the Applicant has stopped telephone soliciting activities or ceased doing business, the Applicant is required to keep a surety bond, letter of credit, or certificate of deposit in effect for one year after it notifies the Division in writing that it has ceased operation. Failure to provide proof that the surety will be in effect for one year after notification to the Division may result in the Division claiming on the company's current surety.

SIGNATURE AND DECLARATION

I understand that if any information provided in this application or in an exhibit to this application materially changes or becomes incorrect or incomplete, the applicant is required to submit corrected information to the division no later than 30 days after the day on which the information changes or becomes incorrect or incomplete.

I declare under criminal penalty under the law of Utah that the foregoing application and exhibits are true and correct.

Applicant Printed Name

Applicant Signature

City, State

Date