



PRIVATE SECURITY SERVICES

Security Service

Security Guard

Private security services means a person, firm or corporation, including its employees and agents, engaged in the business of providing protection to third persons, firms or corporations, and/or their property and preserving the peace and conduct of any business in the City, but does not mean persons who are employed to provide unarmed internal security for their employer's business. It is unlawful for any person, firm or corporation, or employee or agent of such person, firm or corporation, to engage in the business of private security service or to represent himself or herself to any person or the public as private security services without having first procured a license therefore, as provided by City Charter, from the Director of Finance.

ADDITIONAL DOCUMENTS REQUIRED WITH APPLICATION

- Authority for Release of Information for each applicant
- Security guard attach documentation of completion of a least twenty-four hours of classroom instruction or an acceptable equivalent amount of training received within the past year
- Armed guard applicants must provide:
 - A certificate from a licensed physician reciting that the applicant has been examined within the sixty (60) days preceding the application date and was found to be able to satisfactorily perform the duties required as an armed private security service employee
 - A certificate of satisfactory completion of an approved and generally accepted firearms training course; sixteen (16) hours for initial license, four (4) hours for renewal

FEE REQUIRED

- \$30.00 private security services annual license fee
- \$12.00 private security guard annual license fee
- \$6.85 CCIC annual fee

TERMS OF LICENSE

The term of a private security license is for one year from the date of issuance.

Once application has been approved business licenses will be mailed and guard will be notified to pick up security guard ID.

1000 10TH St, Greeley, CO 80631
970.350.9728 FAX 970.350.9736



Private Security Services Business License

Private Security Guard License

A background check is required of all applicants for the above licenses or certificates. The following is required prior to going to Greeley/Weld Criminal Justice Records Section, 1551 N. 17th Avenue, Greeley, CO for the background check.

Step 1:

- Complete and sign application form.
- Complete and have notarized Authority for Release of Information form.
- Proof of identification.

Step 2:

- Fingerprint card obtained at the Weld County Jail, 2110 O St, Greeley, CO. There is a \$10.00 fee charged by the Weld County Sheriff's Office for fingerprinting.

Step 3:

- Take completed application and fingerprint card to 1551 N. 17th Avenue with payments of \$6.85 plus \$30.00 license fee.
- Money order or company check made out to the Colorado Bureau of Investigations (CBI) for \$16.50 per applicant.
- Id card will be made at this location.

Fingerprints must be obtained from Weld County Jail. The final step is to drop all paperwork and all payments to the Greeley/Weld Criminal Justice Records Division located at 1551 N. 17th Ave Greeley, Co.

1000 10TH St, Greeley, CO 80631
970.350.9728 FAX 970.350.9736



APPLICATION FOR PRIVATE SECURITY SERVICE

1000 10th St
Greeley, CO 80631
970.350.9728
970.350.9736 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 L 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

1000 10th St
Greeley, CO 80631
970.350.9728
970.350.9736 fax

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, whosoever 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 _____, _____.

Notary Public Expiration Date (Notary Seal)

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 _____

For internal use only:

IDENTIFICATION PROVIDED

- Colorado Driver's License
- Colorado Identification Card Issued by Department of Motor Vehicles
- United States Military Card
- United States Military Dependent Identification Card
- United States Coast Guard Merchant Mariner Card
- Native American Tribal Document

For internal use only:

ALTERNATE I.D. PROVIDED Only through July 1, 2007

- Original birth certificate from any state of the United States
- certificate verifying naturalized status by U.S. with photo and raised seal
- Certificate verifying U.S. citizenship by U.S. government, e.g., U.S. passport
- Order of adoption by a U.S. court with seal of certification
- valid driver's license from any state of the U.S. or the Dist. of Columbia excluding AK, HI, IL, MD, MI, NE, NM, NC, OR, TN, TX, UT, VT and WI
- Valid immigration documents demonstrating lawful presence, e.g., current foreign passport with current I-551 stamp or visa, current foreign passport with I-94, I-94 with asylum status, unexpired Resident Alien card, Permanent Resident card or Employment Authorization card

*A waiver may be available where no identification exists or can be obtained due to a medical condition, homelessness, or insufficient documentation to receive a Colorado I.D. or driver's license. Contact your department director.

ADVISEMENT REGARDING USE OF COLORADO DEPARTMENT OF REVENUE EMERGENCY RULES FOR TEMPORARY ADDITIONAL IDENTIFICATION DOCUMENTS OR PROCEDURES

The Colorado Department of Revenue requires the following advisement if the Applicant chooses to use one of the additional forms of identification authorized by its Executive Director pursuant to § 24-76.5-103(5)(a), C.R.S.:

1. Under current Colorado law, in order to receive benefits beyond July 1, 2007, Applicant must produce one of the following forms of identification: a valid Colorado driver's license or a Colorado identification card issued pursuant to Article 2 of Title 42, C.R.S.; a United States military card or a military dependent's identification card; a United States Coast Guard merchant mariner card; or a Native American tribal document.

2. As soon as possible, Applicant should begin working diligently to secure the appropriate identification document; and

3. A determination of eligibility for benefits based on an Alternative Identification or the Electronic Identification Indicator in no way constitutes a representation that Applicant has provided sufficient information or documentation to support the issuance of one of the forms of identification set forth in § 24-7605-103(4)(a) C.R.S.



CITY OF GREELEY

FINANCE DEPARTMENT

1000 10TH STREET

GREELEY, CO 80631

(970) 350-9733 FAX (970) 350-9736

<http://www.greeleygov.com>

APPLICATION FOR SALES TAX / USE TAX

NO LICENSE FEE IS REQUIRED. THE GREELEY SALES/USE TAX RATE IS 3.46%

BUSINESS INFORMATION

Name of Business: _____
 DBA Name: _____
 Physical Address: _____
 Telephone Number: _____ Fax: _____
 Email: _____ Web Site: _____
 FEIN: _____ SSN: _____
 Year company was founded: _____ Length of time at this location _____
 Is this the headquarters for this company? Y N

BUSINESS DESCRIPTION

Please provide a detailed description of the nature of business (products sold and services provided):

NAICS Code: _____

If you do not know your NAICS code, please check which best describes your business activity:

- Agriculture Utilities Construction Manufacturing Wholesale Trade
 Retail Trade Transportation, Warehousing Information Real Estate, Rental, & Leasing
 Professional Health Care Accomodation, Food Services
 Other: _____

Type of Ownership (Select Only One):

Sole Proprietor LLC Partnership Corporation LLP Other _____

Name of Owner (s): _____

Address of Owner: _____

Filing Frequency:

- Monthly (tax collected is over \$50/month) Quarterly (tax collected is \$25.00-\$49.99/month)
 Annual (tax collected is less than \$25/ month)

MAILING AND CONTACT INFORMATION

Sales/Use Contact: _____ Title: _____

Telephone Number: _____ Fax: _____

Email: _____

Mailing Address: _____

Date Started or Date Business Will Open: _____

Name of Former Owner (If Purchasing Existing Business): _____

I declare under penalty of perjury, that this application has been examined by me and that the statements made herein are, to the best of my knowledge and beliefs, are true, correct and complete.

Authorized Signature: _____ Date: _____

FOR CITY USE ONLY:

ACCT # _____ GEO: _____ PROP ID: _____ SQ. FT. _____



CITY OF GREELEY

FINANCE DEPARTMENT

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GREELEY, CO 80631

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APPLICATION FOR SALES TAX / USE TAX INSTRUCTIONS

GENERAL INFORMATION:

- * If the business or home occupation has a physical location within the City limits of Greeley, a Sales/Use Tax License/Zoning Review/Occupancy Certificate check-off list must be completed and signed by the Community Development and Building Inspection departments. These departments are located at 1100 10th Street, Greeley, CO 80631. There are no charges for these services and there is no sales/use tax license fee required.
- * If the business is a City of Greeley sewer user, the Commercial Sewer User Classification Questionnaire must be completed.
- * Return the completed and signed application, the completed and signed check-off list (if applicable) and sewer questionnaire (if applicable) to the following address: City of Greeley, Finance Department, 1000 10th Street, Greeley, CO 80631

BUSINESS INFORMATION:

- * Please provide the information indicated, and include area codes when listing telephone numbers.

BUSINESS DESCRIPTION:

- * If you know the North America Industry Classification System (NAICS) code, for your business fill in the blank. Provide a detailed description of your business, including products sold and services provided. Check the box best describing your business.
- * Type of Ownership:
 - Sole Proprietorship: Business is owned and operated by a single individual.
 - LLC: Limited Liability Company - combines the tax attributes of a partnership with the attributes of a corporation for liability purposes. An LLC may have one or several members and is created by filing "Articles of Organization" with the Secretary of State
 - Partnership: Business is owned by two or more individuals or other business entities.
 - Corporation: "C" Corporation - A legal entity existing separately from the parties creating the entity. "Articles of Incorporation" are filed with the Secretary of State and bylaws are adopted.
 - LLP: Limited Liability Partnership or Limited Liability Limited Partnerships (LLLLP) - Legal Limited Liability Partnership Act (7/1/95) created a legal structure similar to S Corp and a LLC. A "Registration Statement" is filed with the Secretary of State.
 - Other: Please select this category, and give a brief description if the entity is a Subchapter S ("S") Corporation, a Limited Partnership Association, or a Nonprofit Organization or any other type of ownership.

MAILING AND CONTACT INFORMATION:

Please provide the requested information, even if it is the same as the business information. If this is a new business, or an existing business was purchased, and is physically located in Greeley, the applicant will need to file an Initial Use Tax return, and pay any applicable use tax.

CITY OF GREELEY, COLORADO
SALES TAX LICENSE / ZONING REVIEW / OCCUPANCY CERTIFICATE
CHECK-OFF LIST

A) TO BE COMPLETED BY APPLICANT:

APPLICANT _____ DATE _____

LOCATION (not PO BOX) _____

SAME AS RESIDENCE? _____ YES _____ NO _____

PHONE NO _____ BUSINESS NAME _____

TYPE OF BUSINESS _____

PLEASE CHECK CORRECT ONE AND BRIEFLY DESCRIBE ACTIVITY

SALES _____ SALES & SERVICE _____ SERVICE _____

MANUFACTURING _____ OTHER _____

ACTIVITY: _____

B) TO BE COMPLETED AND SIGNED BY COMMUNITY DEVELOPMENT DEPARTMENT

Community Development 1100 10th Street, Greeley, CO 80631 Phone: (970) 350-9780 Fax: (970) 350-9800

ZONING _____ USE BY RIGHT _____

LAWFUL NON-CONFORMING _____

HOME OCCUPATION _____

MEETS HOME OCCUPATION REQUIREMENT _____

OTHER _____

COMMENTS: _____

SIGNED _____ DATE _____

C) TO BE COMPLETED AND SIGNED BY INSPECTION DIVISION

Building Inspection 1100 10th Street, Suite 114, Greeley, CO 80631 Phone: (970) 350-9830 Fax: (970) 350-9844

CERTIFICATE ISSUED _____ DATE _____

OCCUPANCY CERTIFICATE NOT REQUIRED OR PREVIOUSLY ISSUED _____

SIGNED _____ DATE _____

CITY OF GREELEY

COMMERCIAL SEWER USER CLASSIFICATION QUESTIONNAIRE

When a business is opened or changes hands, the sewer account is reviewed for proper billing classification. It is important that you fill out this questionnaire accurately and completely, to ensure your business is receiving the correct billing rate. Please return this questionnaire along with your Sales Tax License Application.

Name of Business:

Short Business Description:

Contact Person:

Is this a home-based business? _____yes* _____no

**If yes, then please stop here and return the form.*

Outside Landscape square footage (this information is *very important* in establishing correct sewer billing information for commercial businesses.)

_____ Less than 15,000 ft² _____ more than 15,000 ft²

Please read the following classifications to determine which class your business best fits, and check the appropriate one. If it does not fit into any of the following classes, then please explain:

____ **Class I:** includes retail stores, offices, car washes, cleaners, laundromats, schools, colleges, churches, beauty shops, financial institutions, membership organizations without dining facilities, motels without dining facilities, gas stations without repair, and bed and breakfasts that serve only a continental breakfast.

____ **Class II:** includes bars and taverns without dining, service stations and garages with repair, animal clinics, hospital/convalescent homes, photo finishing, light manufacturing, coffee shops, convenience stores, and bed and breakfasts that cook a daily breakfast.

____ **Class III:** includes restaurants, hotels with dining facilities, bars and taverns with dining, and membership organizations with dining.

____ **Class IV:** includes food markets (grocery stores), butchers, bakers, and food manufacturing.

____ **Class V:** includes mortuaries and miscellaneous heavy commercial manufacturing.

If you have any questions, then please contact the City of Greeley Industrial Pretreatment Program at 970-350-9363. Thank you for your cooperation and assistance.

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 _____

For internal use only:

IDENTIFICATION PROVIDED

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- ___ Native American Tribal Document

For internal use only:

ALTERNATE I.D. PROVIDED Only through July 1, 2007

- ___ original birth certificate from any state of the United States
- ___ certificate verifying naturalized status by U.S. with photo and raised seal
- ___ certificate verifying U.S. citizenship by U.S. government, e.g., U.S. passport
- ___ order of adoption by a U.S. court with seal of certification
- ___ valid driver's license from any state of the U.S. or the Dist. of Columbia excluding AK, HI, IL, MD, MI, NE, NM, NC, OR, TN, TX, UT, VT and WI
- ___ valid immigration documents demonstrating lawful presence, e.g., current foreign passport with current I-551 stamp or visa, current foreign passport with I-94, I-94 with asylum status, unexpired Resident Alien card, Permanent Resident card or Employment Authorization card

*A waiver may be available where no identification exists or can be obtained due to a medical condition, homelessness, or insufficient documentation to receive a Colorado I.D. or driver's license. Contact your department director.

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2. As soon as possible, Applicant should begin working diligently to secure the appropriate identification document; and
3. A determination of eligibility for benefits based on an Alternative Identification or the Electronic Identification Indicator in no way constitutes a representation that Applicant has provided sufficient information or documentation to support the issuance of one of the forms of identification set forth in § 24-7605-103(4)(a) C.R.S.

**CITY OF GREELEY, COLORADO
INITIAL USE TAX FORM**
(Instructions are on the reverse side of this form)

Greeley Sales Tax License Number:			
Business Name:			
Business Address:	City:	State:	Zip Code:
Business Telephone Number:			

Section A

Date of Purchase	If business was purchased, indicate: Seller's Name and Address	Purchase Price of Equipment, Fixtures, Furniture, Supplies, Etc.	3.46% of Purchase Price

Section B: Purchase of Equipment, Fixtures, Furniture, Supplies, Etc.

Invoice Date	Vendor's Name and Address	Purchase Price on Which Tax Was Paid	Purchase Price on Which Tax Was <u>Not</u> <u>Paid</u>
Totals			
		Amount Due	X 3.46%

Section C: Leases of Equipment, Fixtures, and Furniture

Lessor	Address	Type of Equipment Fixtures / Furniture	Tax paid by (/)	
			Lessor	Lessee

Total Tax Due

Section A _____ + Section B _____ = Total Tax _____

Penalty _____ + Interest _____ = Total Tax, Penalty & Interest _____

CITY OF GREELEY, COLORADO

Instructions - Initial Use Tax Form

The INITIAL USE TAX FORM must be completed when an existing business is purchased from a previous owner, or when opening a new business.

PURCHASED BUSINESS - If you purchased the business from a previous owner, the USE TAX you owe is 3.46% of the purchase price of the equipment, fixtures, supplies, etc., based on the allocated acquisition price as stated in the purchase contract, but not less than the fair market value. COMPLETE SECTION A.

NEW BUSINESS - If this is a new business, COMPLETE SECTION B. List vendors from whom you purchased your equipment, fixtures, furniture, supplies, etc., as shown in the purchase contract. Indicate the purchase price in the appropriate column, Tax Was Paid or Tax Was Not Paid. Multiply the Tax Was Not Paid column by 3.46% This is the amount due from your business.

If you lease equipment, fixtures, or furniture, a 3.46% tax is due on the gross amount of the lease. COMPLETE SECTION C. This amount is to be paid either by you or the lessor over the period of the lease. List all leases and indicate whether you or the lessor will pay the tax.

If a local sales tax has been paid, but at a rate of less than 3.46% use tax is due on the difference between the amount of sales tax actually paid and the amount calculated at the rate of 3.46%

Please provide a detailed listing for each section that applies to you. If additional space is needed, attach continuation sheets.

Checks should be made payable to the City of Greeley. This form is due on the 20th day of the month following the date an existing business in Greeley is purchased. If this is a new business, the form is due on the 20th day of the month following the first day that sales are made or services are provided in Greeley. A late filing of this form is subject to a 10% penalty of the tax owed, and interest of 1% per month of the tax owed.

Return this form to the City of Greeley, 1000 10th Street, Greeley, CO 80631. If you need assistance in completing the form, or have questions concerning the use tax, please contact the sales tax office at (970) 350-9733.

After the INITIAL USE TAX FORM has been filed, subsequent purchases should be included on your regularly filed sales/use tax returns for the City of Greeley. Do not use this form to compute or pay tax on motor vehicles, trailers, or the tax on materials used in construction of real property or real property improvements which involve the issuance of a building permit.