CITY OF LAKEWOOD

INDIVIDUAL ESCORT LICENSE APPLICATION

Lakewood Civic Center

An Individual Escort License allows for applicant to operate as an Escort in the City of Lakewood. Please refer to the Lakewood Municipal Code, Chapter 5.53.

ADDITIONAL DOCUMENTS REQUIRED WITH APPLICATION

- Copy of criminal history from the state of Colorado www.cbirecordscheck.com
- Lawful presence affidavit

FEES REQUIRED FOR INITIAL APPLICATION

- $ 50.00 nonrefundable application fee
- $ 25.00 Annual License fee
- $ 16.50 Background investigation and fingerprinting fee

APPROVAL OF PERMIT

After completion of the application and applicant has had fingerprints and photographs taken. The application is sent to the Police Department for their approval. This process takes approximately 30 days. You will be notified by the City Clerk's Office of the approval/disapproval of the application.

Please note: The Lakewood Police Department may require the submission of criminal histories from additional states as warranted. If you have any questions regarding an Escort Service License, please call the City Clerk's Office at 303-987-7080.

FINGERPRINTING IS BY APPOINTMENT ONLY

To set up an appointment please call:
Dione Stanley 303-987-7314
or
Sandra Dockter 303-987-7316

CITY OF LAKEWOOD

City Clerk's Office
Lakewood Civic Center
480 S. Allison Pkwy.
Lakewood, CO 80226-3127
Phone: 303-987-7080
Fax: 303-987-7088
TDD: 303-987-7057

CITY OF LAKEWOOD, COLORADO
INDIVIDUAL ESCORT SERVICE LICENSE APPLICATION

This document provides basic information that is necessary for the licensing authorities' investigation. **ALL** questions must be answered in their entirety. Every answer you give will be checked for its truthfulness. **A falsehood, or omission of facts, constitutes evidence regarding the character of the applicant and may result in denial of the application.**

PERSONAL INFORMATION

1. Your name: _____
   Last Name First Name Middle Initial

2. Other names used: _____

3. Home Address: _____
   Street Name City & State Zip Code

4. Home Phone: _____
   (Area Code)

5. Date of Birth: _____ 10. Place of Birth: _____

6. Sex: ❒ F ❒ M 7.Race: _____ 8. Eye Color: _____

9. Height: _____ 10. Weight: _____ 11. Hair Color: _____

12. Driver's License No.:_____13. State Issuing Driver's License: _____

14. Has your driver's license ever been suspended or revoked? ❒ Y ❒ N

15. If yes, please explain (include date and location): _____

    _____

16. Are you a U.S. Citizen? ❒ Y ❒ N 17. Permanent Residence No.: _____

18. Alien Registration No.: _____ 19. Naturalization No.: _____

19. Escort Service Name_____

20. Trade Name: _____

21. Business Address: _____
    Street Name City & State Zip Code

22. Business Phone: _____
    (Area Code)

23. List all states of residence (including military):_____

_____

24. List addresses for the past five years (attach separate page if necessary)

Street Address	City, State & Zip Code

EMPLOYMENT HISTORY

25. Name of present employer:_____

26. Type of Business:_____ 27. Current Position: _____

28. Business address:_____
Street name City, State Zip Code

29. Business phone no.:_____ 30. Length of Employment:_____
(Area Code)

31. Employment for the last 5 years:

Company Name	Complete Address Include street name, city, state and zip	Telephone Number	Position Held	From/To

32. Have you ever been discharged from a position? ❒ Y ❒ N If yes, please explain: _____

_____

33. Business Name: _____

34. Trade Name: _____

35. Business Address: _____
Street Name City & State Zip Code

36. Business Phone: _____

37. In the previous 5 years have you ever had a license, permit, or authorization to do business denied?
❒ Y ❒ N

If yes, list Business license type, date, jurisdiction and details:

_____

_____

_____

38. In the previous 5 years have you ever had any professional or vocational license or permit denied, revoked, or suspended? ❒ Y ❒ N

If yes, list license type, date, jurisdiction and details:

_____

_____

_____

39. List all of your arrests (include date, charge, location, conviction, sentence and disposition):

_____

_____

_____

The following attachments have been included with this application:

_____ Copy of criminal history from the state of Colorado

_____ Affidavit of lawful presence

I certify that the information contained in this Background Investigation Report and all attachments hereto, is true and complete. I understand that any misrepresentation or falsification may result in the rejection of this application or suspension/revocation of the license. I consent to the release of all financial information relative to this application.

I understand that I have a continuing obligation to provide updated information on questions in applications submitted to the City. I further understand that I will need to be fingerprinted and photographed. Should an answer change, or new information becomes available, I will contact the City at 303-987-7080.

_____ _____

Applicant's Signature Date

Subscribed and sworn to before me this _____day of _____, 20____

_____

Notary Public

My Commission Expires: _____

City Clerk's Office – Referral to Police Department – Date _____

****

Criminalistics:

( ) Photographs By: _____

( ) Fingerprints Date: _____

LPD Identification No._____

****

Investigation Division: Date Received: _____

Criminal History

( )	Yes	( )	No – Criminal Record, NCIC
( )	Yes	( )	No – Criminal Record, CCIC
( )	Yes	( )	No – Criminal Record, Lakewood Police Department
( )	Yes	( )	No – Criminal Record, Jeffco Sheriff's Office
( )	Yes	( )	No – Criminal Record, _____
( )	Yes	( )	No – Criminal Record, _____

Background Summary: _____

_____

Memorandum Completed: ( ) Yes ( ) No

By: _____ Date: _____

Investigator

_____ Date: _____

Reviewing Supervisor

****

Recommendation:

( ) Approval ( ) No Recommendation ( ) Disapproval

_____ Date: _____

Investigation Division

CITY OF LAKEWOOD
LAWFUL PRESENCE AFFIDAVIT

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 or I am a sole proprietor entering into a contract or purchase order with the City of Lakewood, in the State of Colorado. 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 or prior to entering into a contract with the City of Lakewood. 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.

_____ _____
Print Full Legal Name Date

_____
Signature

For office use only:

Type of identification presented _____

Initials of verifier_____