



CITY OF LAKEWOOD

ESCORT SERVICES LICENSE APPLICATION

Lakewood Civic Center

An Escort Service License allows for applicant to operate Escort Services in the City of Lakewood.

ADDITIONAL DOCUMENTS REQUIRED WITH APPLICATION

- Copy of criminal history from the state of Colorado
www.cbirecordscheck.com
- Lawful presence affidavit
- Certificate of Good Standing
- Certificate of Authority (if foreign company)

FEE 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 90 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**

PERSONAL INFORMATION

9. Your name: _____
Last Name First Name Middle Initial
10. Other names used: _____
11. Home Address: _____
Street Name City & State Zip Code
12. Home Phone: _____
(Area Code)
13. Date of Birth: _____ 14. Place of Birth: _____
15. Sex: F M 16. Race: _____ 17. Eye Color: _____
18. Height: _____ 19. Weight: _____ 20. Hair Color: _____
21. Social Security No. _____
22. Driver's License No.: _____ 23. State Issuing Driver's License: _____
24. Has your driver's license ever been suspended or revoked? Y N
25. If yes, please explain (include date and location): _____

26. Is your driver's license suspended, revoked, canceled or denied now? Y N
27. If yes, please explain (include date and location) _____

28. Are you a U.S. Citizen? Y N 29. Permanent Residence No.: _____
30. Alien Registration No.: _____ 31. Naturalization No.: _____
32. List all states of residence (including military): _____

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

| Street Address | City, State & Zip Code |
|----------------|------------------------|
| | |
| | |
| | |
| | |

EMPLOYMENT HISTORY

34. Name of present employer: _____

35. Type of Business: _____ 54. Current Position: _____

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

37. Business phone no.: _____ 57. Length of Employment: _____
(Area Code)

38. Employment for the last 10 years:

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

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

ADDITIONAL BACKGROUND INFORMATION

40. 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:

41. 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:

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

43. List all civil court actions (include divorce, name changes) along with the names of litigants, dates, court of jurisdiction and cause of action: _____

44. List all of your traffic charges (include date, location, charge, conviction, sentence, and disposition):

ADDITIONAL DOCUMENTS CHECKLIST

- () Lawful presence affidavit
- () Copy of criminal history from the state of Colorado
- () Stamped Articles of Incorporation and/or Certificate of Good Standing (if incorporated 2+ years)
- () Partnership Agreement
- () Stamped Articles of Organization
- () Certificate of Authority (if foreign company)

I certify that the information contained in this Background Investigation Report and all attachments hereto is true and complete. I understand that any misrepresentation, falsification, or omission 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 become 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 _____