

APPLICATION FOR ESCORT SERVICE RUNNER/ESCORT LICENSE

FAILURE TO TRUTHFULLY ANSWER ANY ITEMS ON THIS APPLICATION MAY RESULT IN DENIAL OF A LICENSE

APPLICATION FEE	\$	15.00	RENEWAL	\$	100.00
LICENSE FEE	\$	100.00			
BACKGROUND CHECK FEE	\$	20.00			

Every application for an Escort Service Runner/Escort license shall contain two (2) recent passport size color photographs, two (2) classifiable sets of fingerprints, a letter of hire from your employer and a certified copy of your birth certificate. Applications can be submitted at the Police Operations Center Monday, Wednesday and Friday of each week, during the hours of 8:00 a.m. and 11:00 a.m. Applications submitted after 11:00 a.m. will not be processed until the following processing day. Applicants may go to the City Clerk’s Office for licensing on Tuesday and Thursday between the hours of 2:00 p.m. to 4:00 p.m.

1.	Full Name of Applicant: _____																				
2.	Any other names by which you have been known: _____																				
3.	Present Address: _____																				
4.	Home Phone: _____ Birthdate: _____ SSN# _____																				
5.	Place of Birth: _____ Race: _____																				
6.	Company You Will Be Working For: _____																				
7.	Supervisor: _____																				
8.	List residence addresses for 5 years prior to date of this application																				
	<table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 35%;">ADDRESS</th><th style="width: 25%;">CITY/STATE</th><th style="width: 20%;">FROM</th><th style="width: 20%;">TO</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr></tbody></table>	ADDRESS	CITY/STATE	FROM	TO	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____																		
9.	Have you ever been charged or convicted with a criminal offense, fined, imprisoned, placed on probation, received a suspended sentence, or forfeited bail for any offense in criminal court? (Include misdemeanors and any pending charges). YES: _____ NO: _____																				
10.	If yes, please give nature of offense(s), date occurred, place occurred and penalties imposed for each offense: _____ _____ _____ _____																				

ESCORT SERVICE RUNNER/ESCORT LICENSE

11. List work history for 5 years prior to date of this application (LIST MOST RECENT FIRST)

COMPANY	SUPERVISOR	FROM	TO
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. Veteran of U.S. Armed Forces: YES: _____ NO: _____

13. If yes, have you ever been tried by a Military Court Martial? YES: _____ NO: _____

14. If yes, please give nature of offense(s), date occurred, place occurred and penalties imposed for each offense:

15. Have you ever had an Escort Service Runner/Escort license denied, suspended or revoked in this or any other state? YES: _____ NO: _____

16. If yes, please give details:

17. Please state any known physical or mental health problems:

18. Have you ever been involuntarily confined to a mental health institution? YES: ____ NO: ____

19. If yes, please give reason and location:

ESCORT SERVICE RUNNER/ESCORT LICENSE

SWORN AFFIRMATION

I hereby certify that the statements made by myself and constituting part of this application are true and correct. I am fully aware that any misrepresentation of any information on this application may be grounds for denial of a license. I have been furnished with, and am familiar with, the ordinances and regulations pertaining to this application. I further understand that any violation of the laws of the State of Colorado, or the Ordinances of the City of Colorado Springs, Colorado, can result in denial of this application, or suspension/revocation of my license.

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize and consent to the release of information and all known records including criminal convictions, if any, to authorized agents of the Colorado Springs Police Department, City Clerk's Office, and any other department requiring the information for approval of this license. This authorization shall be valid for the duration of my license, and any renewals thereof.

Dated: _____

Signature of Applicant

State of Colorado)
) ss.
County of El Paso)

Subscribed and sworn to before me this _____ day of _____, 20_____.

My Commission Expires: _____

Notary Public: _____

NOTICE

THE POLICE OPERATIONS CENTER (POC) IS LOCATED AT 705 S. NEVADA AVE. AT THE CORNER OF NEVADA AND RIO GRANDE ST.

PLEASE DO NOT LEAVE MONEY WITH THIS APPLICATION AT THE POLICE OPERATIONS CENTER. PLACE THE APPLICATION ONLY IN THE BOX DESIGNATED FOR BACKGROUND CHECKS BETWEEN THE HOURS OF 8:00 A.M. AND 11:00 A.M. YOU MAY GO TO THE CITY CLERK'S OFFICE FOR LICENSING TUESDAY OR THURSDAY BETWEEN 2:00 P.M. AND 4:00 P.M. AFTER LEAVING YOUR APPLICATION AT THE POC (MONDAY, WEDNESDAY OR FRIDAY). BE SURE TO BRING YOUR FINGERPRINT CARDS (2 SETS), PASSPORT SIZE PHOTOGRAPHS (2), A LETTER OF HIRE FROM YOUR EMPLOYER AND A CERTIFIED COPY OF YOUR BIRTH CERTIFICATE TO THE CITY CLERK'S OFFICE.

THE FINGERPRINT CARDS (2 SETS) MUST BE COMPLETELY FILLED IN, LEGIBLE AND MUST BE ON PRINT CARDS PROVIDED BY THE CITY CLERK'S OFFICE. YOU MAY TAKE THOSE CARDS TO ANY PASSPORT PHOTO BUSINESS THAT PROVIDES FINGERPRINTING SERVICES OR TO ANY LAW ENFORCEMENT AGENCY.

REMEMBER - APPLICATIONS ARE PROCESSED AT THE POLICE OPERATIONS CENTER ON MONDAY, WEDNESDAY AND FRIDAY ONLY.