



OFFICE OF THE CITY CLERK  
SEXUALLY ORIENTED BUSINESS  
MANAGER REGISTRATION FORM

**INSTRUCTIONS:** Complete application in its entirety and submit to the City Clerk's Office at the address below with \$82.00 (\$75.00 application fee and \$7.00 background check fee) payable to the City of Colorado Springs.

**APPLICANT INFORMATION**

Full Name	Aliases
Residence Address	
Mailing Address (if different)	
E-mail Address	Phone Number
Date of Birth	Date of Employment

**BUSINESS INFORMATION**

Licensee Name (Employer)	City License Number
Owner Printed Name	
Owner Signature	Date

**CRIMINAL AND LICENSE HISTORY**

Has the applicant ever been <b>arrested, charged, or convicted</b> of <b>ANY</b> criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No. If Yes, explain date, place, nature of the charge, and disposition of the events.
Has the applicant ever been convicted of operating as an individual or a business without a license? <input type="checkbox"/> Yes <input type="checkbox"/> No. If Yes, explain date, place and disposition of events.
Has the applicant ever had a business license denied, suspended, or revoked, whether in this state or any other state? <input type="checkbox"/> Yes <input type="checkbox"/> No. If Yes, explain type of license, action taken and reasons, date and place of action, and agency or entity that took such action.



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**STATEMENT OF RELEASE AND AFFIRMATION**

I hereby authorize the City of Colorado Springs ("City") to investigate my background and qualifications for purposes of evaluating whether I am qualified to be a registered manager of the licensee. I consent to the City searching and collecting any and all public, private, and/or confidential information and records, now and anytime in the future while I am the designated registered manager of the licensee. I agree to hold the City, its officers, councilmembers, agents and employees, harmless if the results of this investigation include incorrect information that the City, in the exercise of ordinary care, would not know to be incorrect. I also understand that I may withhold my permission and that in such a case, no investigation will be conducted, and my application will not be processed further. By providing an e-mail address above, you agree the City may provide any required or permitted process, notice, order, or correspondence by e-mail to the e-mail address provided.

By submitting this application, you understand and acknowledge that the City Clerk's Office may request other relevant information from you in connection with this application. Failure to provide the requested information may result in denial of this application. You also acknowledge and understand the City Clerk's Office cannot accept an application unless it is accompanied by the required fees. The failure to pay the required fees or provide other required information may result in denial of this application.

**By signing below, I affirm under penalty of perjury that the statements contained in this application and any attachments hereto are true, correct and complete.**

Signature	Printed Name	Date
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