



1. Application Type: Initial Renewal

2. Applicant's Full Business Legal Name: _____ 3. Applicant's Principal Telephone Number: _____

4. Applicant's Principal Street Address: _____
 City: _____ State: _____ Zip Code: _____

5. Applicant's Mailing Address: _____
 City: _____ State: _____ Zip Code: _____

OPTIONAL APPLICANT/THIRD PARTY CONTACT INFORMATION

Contact Person Name:	Contact Person Title:
Internet Site Address:	Contact Person's Electronic Mail Address:
Contact Person's Telephone Number:	Contact Person's Facsimile Number:

6. Legal Form of Applicant's Business:
 Sole Proprietor / Individual Corporation General Partnership
 Limited Liability Corporation Limited Liability Partnership Other _____

7. Applicant's State of Establishment: _____ 8. Applicant's Date of Establishment: _____

9. For non-NC corporations: Provide either of the following to verify the applicant's current legal existence:

- Certificate of Existence or Certificate of Good Standing from state of incorporation dated no more than six months prior to date of signing of application, or
- Actual webpage screenshot found on a publicly accessible regulatory authority website dated no more than thirty (30) days prior to the date the license application was signed that includes the following elements:
 - Exact name of the entity as it appears on the license application; and
 - Language clearly verifying its status in good standing in the state of incorporation (i.e. "current" or "active"); and
 - Date the information was printed on the face of the document.

For non incorporated applicants: Copy of stamped certificate of "doing business as" or "assumed name" filed with local Register of Deeds must be filed with application.

10. If applicant's principal place of business is located outside North Carolina, ATTACH list of street addresses of any applicant offices located in North Carolina. ATTACHMENT 10 included? Yes No NC Offices

11. Are ANY of applicant's owners, directors, officers, or employees RELATED as parent, spouse, child, or sibling to ANY of applicant's other directors, officers, owners, or employees? Yes No
 If answer is YES, attach a brief written explanation. ATTACHMENT 11 included? Yes

12. Are ANY of applicant's owners, directors, officers, or employees RELATED as parent, spouse, child, or sibling to ANY officer, director, trustee, or employee of any charitable organization or sponsor under contract with applicant? Yes No
 If answer is YES, attach a brief written explanation ATTACHMENT 12 included? Yes

13. Are ANY of applicant's owners, directors, officers, or employees RELATED as parent, spouse, child, or sibling to ANY supplier or vendor providing goods or services to any charitable organization or sponsor under contract with the applicant? Yes No
 If answer is YES, attach a brief written explanation. ATTACHMENT 13 included? Yes

14. Within the last five (5) years, has the applicant, or any of the applicant's directors, officers, employees, agents, or persons with a controlling interest in the applicant: been convicted of ANY felony? Yes No
 If answer is YES, attach a brief written explanation. ATTACHMENT 14 included? Yes



15. Within the last five (5) years, has the applicant, or any of the applicant's directors, officers, employees, agents, or persons with a controlling interest in the applicant been convicted of ANY misdemeanor arising from the conduct of a solicitation for ANY charitable organization or sponsor OR charitable or sponsor purpose?
 Yes No
 If answer is YES, attach a brief written explanation. ATTACHMENT 15 included? Yes

16. Within the last five (5) years, has the applicant, or any of the applicant's directors, officers, employees, agents, or persons with a controlling interest in the applicant been enjoined from violating ANY charitable solicitation law in this or ANY other state?
 Yes No
 If answer is YES, attach a brief written explanation. ATTACHMENT 16 included? Yes

17. ATTACH a list of the NAMES and PHYSICAL RESIDENCE ADDRESSES of ALL of applicant's officers, directors, and owners. This section must be completed for sole proprietorships, partnerships, and corporations of all types.
 ATTACHMENT 17 included? Yes

18. ATTACH a list of the NAMES of ALL persons in charge of ANY solicitation activity.
 ATTACHMENT 18 included? Yes

19. ATTACH the required fee of two hundred dollars (\$200.00) (make check payable to: NC Department of the Secretary of State).
 ATTACHMENT 19 (FEE) included? Yes

20. If Partnership or Corporation, does applicant intend to cover multiple individuals with single license?
 Yes No
 If YES, ATTACH list containing names and street addresses for ALL partners, members, officers, directors, employees, and agents of the applicant, as well as all other individuals contracted to work under applicant's direction.
 ATTACHMENT 20 included?: Yes

21. ATTACH appropriate BOND or other surety required by N.C.G.S. 131F-16(d) in the appropriate amount as follows:

Contributions received in last fiscal year	Required Bond Amount
Up to \$100,000	\$20,000
Up to \$200,000	\$30,000
\$200,000 and over	\$50,000

ATTACHMENT 21 (BOND) included? Yes

22. Applicant's signature:
 I do hereby swear or affirm that the information furnished in this application and all supplemental forms, reports, documents, and attachments are true and correct to the best of my knowledge under penalty of perjury.
 Signature: _____

	Signer's Name (Print):
	Signer's Title (Print):

23. Notarization: The following is for a notary public to place you under oath and then notarize YOUR signature:
 (County) _____ (State) _____
 County and State in which oath or affirmation taken

Notary Stamp or Seal goes Here ↓	Sworn to and subscribed before me this the (e.g., 1 st):	
	Day of (e.g., May):	In the year of (e.g., 2013):
	Notary Public's Signature:	
	Notary Public's Name (Print):	
	Date Notary Public's Commission Expires:	