



Florida Department of Agriculture and Consumer Services
Division of Consumer Services

**COMMERCIAL TELEPHONE SALESPERSON
INDIVIDUAL LICENSE APPLICATION**

NICOLE "NIKKI" FRIED
COMMISSIONER

Section 501.607, Florida Statutes
Rule 5J-6.005, Florida Administrative Code

1-800-HELP-FLA (435-7352) • (850) 410-3800
www.FDACS.gov • (850) 410-3804 Fax

Submit and Pay Non-Refundable Fee online at:
www.FDACS.gov
- or -
Check or Money Order payable to FDACS and remit with application to:
FDACS
PO Box 6700
Tallahassee, FL 32314-6700

All documents and attachments submitted with this application may be subject to public review pursuant to Chapter 119, Florida Statutes (F.S.). PLEASE TYPE OR PRINT. Attach additional pages as necessary using the same format. Please ensure that all attachments reflect the organization's name or registration number and the number of the corresponding question. Annual Registration Fee: \$50.00. Active duty military, honorably discharged veterans, military spouses or surviving spouses may be eligible for a waiver of the registration fee. See sections 501.607(2)(b) and 501.609(5), F.S., and rule 5J-6.005, Florida Administrative Code, for eligibility requirements.

Please Select one: New Filing Renewal TP _____ DTN _____
(as issued by the department and listed on the preprinted renewal application)

APPLICANT INFORMATION [s.501.607(1)(a), F.S.]

1. Legal (True) Name: _____

Date of Birth: _____ / _____ / _____

Driver's License or Government Issued ID Number: _____ **State of Issue:** _____

Street Address (if applicable please include suite, apartment and/or unit numbers):

City: _____ **State:** _____ **Zip Code:** _____ - _____

Email Address: _____ **Telephone Number:** (_____) _____ - _____

EMPLOYER INFORMATION

2. Employer's Legal Name (If employer is not an individual, state the legal name of the entity as filed with the Florida Department of State):

License Number, Issued by the Department:
TC- _____

Physical Street Address (if applicable please include suite, apartment and/or unit numbers):

City: _____ **State:** _____ **Zip Code:** _____ - _____

F&A Use Only

Org. Code: 42 10 06 25 000
EO: A2
Object Code: 002051 \$50.00

Telephone Number:

(_____) _____ - _____

NOTE: If you intend to act as a salesperson for more than one company, please provide us with the additional employer information on a separate page and attach it to this application. You must include a Statement of Verification (located on page 4) for each commercial telephone seller with which you intend to affiliate.

3. Do you have previous experience as a commercial telephone seller or salesperson?

Yes No If yes, previous experience (in months) as a commercial telephone seller or salesperson: _____

CRIMINAL AND LITIGATION HISTORY

4. Please select either **YES** or **NO** to the questions below. If you answered **YES** to any of the following, please explain your answer on "Exhibit A" located on the following page (make additional copies as needed).

- a. Have you, regardless of adjudication, previously been arrested for, convicted or found guilty of, or entered a plea of guilty or nolo contendere to, any felony crime within the last seven (7) years that involves racketeering or any offense involving robbery, carjacking, attempted carjacking, home invasion, or misappropriation of moneys by commissioners to make sales? *[Subsection 5J-6.014(4), F.A.C.]* Yes No
- b. Have you, regardless of adjudication, previously been arrested for, convicted or found guilty of, or entered a plea of guilty or a plea of nolo contendere to, any felony crime within the last five (5) years that involves fraud, theft, embezzlement, fraudulent conversion, or misappropriation of property? *[Subsection 5J-6.014(3), F.A.C.]* Yes No
- c. Have you, regardless of adjudication, previously been convicted or found guilty of, or entered a plea of guilty or a plea of nolo contendere to, any misdemeanor crime within the last three (3) years that involves fraud, theft, embezzlement, fraudulent conversion, or misappropriation of property, or any other crime involving moral turpitude? *[Subsection 5J-6.014(1), F.A.C.]* Yes No
- d. Has there ever been a judicial or administrative finding that the applicant has previously been convicted of acting as a salesperson without a license, or has such a license previously been refused, revoked, or suspended in any jurisdiction? *[s. 501.607(1)(e), F.S.]* Yes No
- e. Have you ever applied for a salesperson license that has been refused, or had a salesperson license revoked or suspended in any jurisdiction? *[s. 501.607(1)(e), F.S.]* Yes No
- f. Have you ever worked for, or been affiliated with, a company that is involved in pending litigation or has had entered against it an injunction, a temporary restraining order, or a final judgment or order, including a stipulated judgment or order, an assurance of voluntary compliance, or any similar document, in any civil or administrative action involving racketeering, fraud, theft, embezzlement, fraudulent conversion, or misappropriation of property or the use of any untrue, deceptive, or misleading representation or the use of any unfair, unlawful, or deceptive trade practice? *[s. 501.607(1)(f), F.S.]* Yes No
- g. Are you involved in pending litigation or have you had entered against you an injunction, a temporary restraining order, or a final judgment or order, including a stipulated judgment or order, an assurance of voluntary compliance, or any similar document, in any civil or administrative action involving racketeering, fraud, theft, embezzlement, fraudulent conversion, or misappropriation of property or the use of any untrue, deceptive, or misleading representation or the use of any unfair, unlawful, or deceptive trade practice? *[s. 501.607(1)(g), F.S.]* Yes No

Exhibit A

Legal (True) Name at the time of the action:

Court or administrative agency rendering the decision, judgment or order:

Governmental agency which brought the action:

Nature of the crime, judgment, order or action:

Date of Action:

Docket Number:

____ / ____ / ____

Please attach additional pages as necessary using the same format.

It is a violation of the Florida Telemarketing Act for a salesperson to fail to maintain a valid license; advertise that one is licensed as a salesperson or to represent that such licensing constitutes approval or endorsement by any government or governmental office or agency; provide inaccurate or incomplete information to the department when making a license application; or misrepresent that a person is registered or that such a person has a valid license number.

The department has adopted rules which allow certain salesperson applicants to operate on an interim basis until such time as a license is granted or denied, such interim authority is not to exceed 90 days. If an interim license has not been granted, then it is unlawful for a salesperson to begin conducting commercial telephone solicitation before such license is issued.

I understand that the Florida Department of Agriculture and Consumer Services will conduct an investigation of my background. In that regard, I hereby waive any right of confidentiality as it reasonably relates to this inquiry.
[s. 501.607, F.S.]

I hereby give my permission and waive any provisions of law that forbid any court, police agency, employer, firm or person from disclosing any knowledge or information they have concerning me which is requested by the Florida Department of Agriculture and Consumer Services. I further consent and request that the Director of the Division of Consumer Services, or the Director's representative, be provided with a certified copy of any such record concerning me which they may deem necessary in the performance of their investigation.

Any commercial telephone seller or salesperson who falsifies information on an application commits a felony of the third degree, punishable as provided in section 775.082, 775.083, or 775.084, F.S.

I DECLARE UNDER PENALTY OF PERJURY THAT ALL OF THE INFORMATION PROVIDED IN THIS APPLICATION, AND IN ANY EXHIBITS ATTACHED HERETO, IS TRUE AND CORRECT.

Applicant Signature

Print or Type Applicant Name

Date

ADDITIONAL INFORMATION

Material Change: Submit FDACS-10006, Florida Telemarketing Act Material Change Form, Rev. 07/17 and, if applicable, a fee of \$10 to the department, within ten (10) days of any changes made to the information provided within the application. *(s. 501.609(2), (4), F.S.)*

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STATEMENT OF VERIFICATION

Section 501.607(2)(a), Florida Statutes
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**NICOLE "NIKKI" FRIED
COMMISSIONER**

I, _____, represent that I am a licensed commercial
Business Representative

telephone seller with _____ with whom
Legal Name of Telephone Seller – Business

_____ will be associated in the activity of commercial telephone solicitation.
Name of Salesperson

It is my desire to associate the individual above as a salesperson and I will accept all responsibility and liability for the commercial telephone solicitation activities of the salesperson, while acting within the scope of his/her employment.

I certify that I am authorized to complete this Statement of Verification and that the information provided is true and accurate.

Signature of Business Representative

Email Address

Date

(_____) _____ - _____
Telephone Number