

## ROADWAY SOLICITATIONS CHECKLIST

- \_\_\_\_\_ Roadway Solicitations application (must be notarized unless submitted in person)
- \_\_\_\_\_ **Certificate of Insurance** in an amount no less than \$1,000,000 (one million dollars), which must contain an endorsement providing for 10-day notice of cancellation or change to:  

**City of Columbus License Section  
4252 Groves Rd,  
Columbus, Ohio 43232**
- \_\_\_\_\_ Completed Results of Activity Form from last year's roadway event
- \_\_\_\_\_ Copy of the IRS 501(C)(3) Exempt Status letter
- \_\_\_\_\_ List of names, addresses and ages of all persons authorized to solicit on behalf of the organization
- \_\_\_\_\_ List of all intersections where soliciting will take place

If you have any questions please contact License Officer, Glenn Rutter at (614) 645-6854.

Be advised that all proceeds must be reported per City of Columbus Code 525.24(C) which states, **"If charitable solicitation occurs during the distribution, the permit holder shall notify the public safety director or their designee within sixty (60) days of conclusion of the net proceeds resulting from the solicitation."**

Note: Persons under the age of eighteen (18) are not permitted to solicit in the roadway.

All individuals working in the roadway must wear a reflective vest.



Main Offices: 111 North Front Street | Columbus, Ohio 43215 | P: (614) 645.7433 | F: (614) 645.0082 | [columbus.gov/bzs](http://columbus.gov/bzs)  
License Section Office | Weights & Measures Office: 4252 Groves Road | Columbus, Ohio 43232 | F: (614) 645.8912

Building Plans Review  
Code Enforcement  
Customer Service Center  
Engineering Plans Review  
License Section

Director's Office  
(614) 645.7562  
(614) 645.2202  
(614) 645.6090  
(614) 645.0032  
(614) 645.8366

(614) 645.7776  
Research/Records Center  
Weights & Measures Section  
Zoning Clearance  
Zoning Confirmation Letters  
Zoning Public Hearings

(614) 645.6082  
(614) 645.7397  
(614) 645.8637  
(614) 645.8637  
(614) 645.4522

**OFFICE USE ONLY**

PERMIT #: \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

DEPARTMENT OF BUILDING AND ZONING SERVICES  
LICENSE SECTION



DEPARTMENT OF BUILDING  
AND ZONING SERVICES

**ROADWAY SOLICITATIONS  
APPLICATION**

THIS FORM SHALL BE FILLED OUT ONLY BY CHARITABLE ORGANIZATIONS HOLDING AN EXEMPT STATUS PURSUANT TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND ARE SEEKING A PERMIT FROM THE CHARITABLE SOLICITATIONS BOARD TO SOLICIT FUNDS IN THE ROADWAY PURSUANT TO SECTION 4511.51 OF THE OHIO REVISED CODE

**ORGANIZATION INFORMATION**

Official Name:

Street Address:

City:

State:

Zip:

Email:

Phone:

Date and Time of Roadway Solicitation Event:

Has this Organization previously held a roadway permit?      Yes      No

If yes, when?      Were the proceeds reported to the License Section?      Yes      No

Does this Organization currently possess a valid Charitable Solicitation permit?      Yes      No

If yes, list license number:

Does this Organization currently have an application for a Charitable Solicitation permit pending approval?      Yes      No

The Columbus City Code requires registration with the State of Ohio. Are you currently registered with the State of Ohio under the provisions of Section 171.02 of the Ohio Revised Code?      Yes      No

State of Ohio, Attorney General registration number/FID:

**APPLICANT INFORMATION**

Full Name:

Title:

Residential Address:

City:

State:

Zip:

Phone:

Email:

PLEASE ATTACH A LIST OF SOLICITORS WHO WILL BE ASSOCIATED WITH SAID EVENT.

ALL INFORMATION CONTAINED IN THE APPLICATION IS SUBJECT TO DISCLOSURE AS A MATTER OF PUBLIC RECORD. ANY FALSE STATEMENT MADE OR GIVEN IN THE APPLICATION SHALL RESULT IN THE DENIAL OF THE APPLICATION OR FUTURE REVOCATION OF THIS LICENSE. APPLICANT MAY ALSO BE REFERRED FOR CRIMINAL PROSECUTION.

State of \_\_\_\_\_ County of \_\_\_\_\_

\_\_\_\_\_ being duly sworn deposes and says he/she is the individual making  
(Print Applicant's Name)

the foregoing application; that he/she is knowledge able with respect to that which is to be licensed; and that the answers to the foregoing questions and other statements contained herein are true of his/her own knowledge and belief.

\_\_\_\_\_  
(Applicant's Signature)

Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary or Agent of Director of Building and Zoning Services

# ROADWAY SOLICITATIONS RESULTS OF ACTIVITY FORM

Please complete this information regarding your Roadway Solicitations  
Event held within the City of Columbus.

Per Columbus City Code 525.23(C) listed below you must provide the net proceeds  
to the License Section within sixty (60) days of the conclusion of your Roadway  
Solicitation event.

Please mail or email completed form according to the information listed below.

OFFICIAL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

DATE/TIME OF EVENT: \_\_\_\_\_

TOTAL AMOUNT RAISED: \_\_\_\_\_

EXPENSES: \_\_\_\_\_

PROCEEDS AFTER EXPENSES: \_\_\_\_\_

City of Columbus - License Section  
4252 Groves Rd  
Columbus, Ohio 43232  
Fax: 614-645-8912  
Email: [charitablesolicitations@columbus.gov](mailto:charitablesolicitations@columbus.gov)

Questions? Call: 614-645-8366