

UNIVERSAL VENDOR LICENSE APPLICATION

Office Use Only
Effective
FP
Rec#
Clerk

- Application must be typewritten or **CLEARLY PRINTED** in black ink. All questions must be answered in full. If a question is not applicable, so state. **Applications, that are not complete and legible, will not be considered.**
- If the space provided is not sufficient for complete answers or you wish to furnish additional information, attach additional sheets of the same size and number of answers to correspond with the question.
- The enclosed Statement of Truth and Notices and Waivers forms must be completed and returned with this application.
- Please do not use extra staples, paperclips, or tabbed pages.

PRINT OR TYPE THE ANSWERS TO THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED

NAME OF APPLICANT*		
*NAME AS APPEARS ON THE CERTIFICATE O OTHER OFFICIAL DOCUMENT.	F INCORPORATION, CHARTER, BYLAWS, PART	INERSHIP AGREEMENT OR
D/B/A OR TRADE NAME(S)		
FEDERAL TAX ID OR SOCIAL SECURITY NUMB	DED*	
FEDERAL TAX ID OR SOCIAL SECURITY NOME	DER	
PERSON TO BE CONTACTED IN F	REFERENCE TO THESE FORMS:	
NAME		
TITLE	TELEPHONE: (AREA CODE) NUMBER	FAX NO. (IF AVAILABLE)
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E-MAIL ADDRESS		

THE PRINCIPAL BUSINESS ADDRESS OF THE APPLICANT:

STREET LOCATION (NUMBER/STREET)	CITY	STATE	ZIP
COUNTRY	TELEPHONE: (AREA COD	E) NUMBER FAX NO	D. (IF AVAILABLE)
MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP
WEBSITE ADDRESS			
Describe the goods and/or service equipment or materials:			
1. ORGANIZATION AND OP			
	EKATION		
Form of Organization (check one) Sole Proprietorship C-Corporation	☐ Partnership ☐ S-Corporation	☐ Limited Partner ☐ Trust	ship
Place of Incorporation or Formation	on:		
Date of Incorporation or Formation	n:		
Is the Applicant registered to do be	usiness in Nebraska?]Yes □ No	

If yes, please provide registration number:
List all other states in which the Applicant is currently registered, licensed, or otherwise authorized to conduct business:
2. <u>DESCRIPTION OF PRESENT BUSINESS</u>
Describe the business presently conducted by the Applicant:
3. <u>APPLICATIONS, LICENSES, FINES AND OTHER PENALTIES</u>
Has the Applicant ever applied for or been granted any license or certificate issued by a licensing authority in Nebraska or any other jurisdiction, foreign or domestic, that has been denied, restricted, suspended, revoked, or not renewed? Yes No
If $\underline{\text{yes}}$, provide a statement describing the facts and circumstances concerning the application, denial, restriction, suspension, revocation, nonrenewal resolution, or settlement, including the licensing authority, the date each action was taken, and the reason for each action.
Has the Applicant ever been granted any license or certificate issued by a licensing authority in Nebraska or any other jurisdiction, foreign or domestic, that has been fined, restricted, subjected to settlement, or otherwise penalized? Yes No
If <u>yes</u> , provide a statement describing the facts and circumstances concerning the fine, restriction, settlement, or other penalty, including the licensing authority, the date each action was taken, and the reason for each action.

APPLICATION APPENDICES

In addition to the information requested in the questions and exhibits above, the Applicant must submit the following information:

Submit copies of certified documents of all the following, including any amendments or proposed amendments thereto, that apply to the Applicant: articles of incorporation, articles of organization, bylaws, charter, constitution, partnership agreement and operating agreement.

Submit documents summarizing the Applicant's organizational structure.

Complete and sign the attached "Statement of Truth" form.

Complete and sign the attached "Notices & Waivers" form.

STATEMENT OF TRUTH

I.	. swea	ar (or affirm) that:	
(Printed Name of Authorized I	Representative)	,	
1. I am a duly authorized represe	entative of the Applicant.		
2. I personally supplied and review or provided to the Commission.	ewed the information con	tained in this for	m as requested by
3. I understand and read the Engapplicable) read, explain, or record attachments, exhibits, appendices, Commission.	the answer to each qu	uestion on this t	form, including all
4. Any document accompanying correct copy of the original document		n original docum	nent is a true and
5. I am aware that if any of the in exhibits, appendices, and other information foregoing statements made by me, is	mation requested by or pro	ovided to the Cor	nmission, or in the
6. The information contained in the Commission, as well as in the followed the knowledge and belief.			
Signature	Title or Po	sition	Date
STATE OF)) SS: COU OF)	INTY		
Subscribed and sworn to before me this	day of of	, 20 <u> </u>	, by
on behalf of said	 		, α
(07.11)			
(SEAL)	Notary Public		

My Commission Expires:_______.

NOTICES & WAIVERS

Please read this document carefully, then sign and date it in ink. Please print the following information:

APPLICANT'S OR HOLDING	COMPANY'S FULL NAME		
STREET ADDRESS	CITY	STATE	ZIP

- A. The Applicant acknowledges and agrees that Applicants for a Universal Vendor License are seeking a privilege. The burden of proving qualifications to receive such a license is at all times borne by the Applicant. The Applicant acknowledges and agrees that the Applicant must accept any risk of adverse public notice, embarrassment, criticism, other action, or financial loss that may result from action or inaction by the Commission with respect to any application, and that the Applicant expressly waives any claim for damages resulting thereof. The Commission may further request information not requested in this form or in addition to that which is provided in response to this form. The Applicant acknowledges and agrees that the Applicant shall provide all information, documents, materials, and certifications at the Applicant's sole expense and cost.
- B. The Applicant acknowledges and agrees that the Applicant must make accurate statements and include all material facts and that any omissions, material errors, misrepresentations, failure to provide any requested information, or failure to meet any other requirement as set forth in law, rule, or regulation may result in the denial of the Application, suspension or revocation of any license issued by the Commission, or issuance of fines or penalties.
- C. The Applicant acknowledges and agrees that any license issued by the Commission is a revocable privilege and is not transferable or assignable in any manner whatsoever. Further, no licensee has a vested right in or under any such license.
- D. The Applicant acknowledges and agrees that the filing fee that must accompany the submission of the Universal Vendor License Application is not refundable once the Application is filed.
- E. The Applicant acknowledges and agrees to be bound by and to comply with the applicable portions of Nebraska Adm. Code Title 296 and any amendments thereto and all applicable current or future rules, conditions, standards, directives, and orders adopted, promulgated, or issued by the Commission.

ted Name of Authorized Representative		Title or	Position
nature		Date	
STATE OF)) SS:			
COUNTY OF)			
Subscribed and sworn to before me this day o	f	, 20	, by
	of		, a
on benan of said	<u> </u>		
(SEAL)	otary Public		