THE CITY OF
COLUMBUS
ANDREW J. GINTHER, MAYOR

DEPARTMENT OF BUILDING
AND ZONING SERVICES

Roadway Solicitations Information Sheet

Phone: 614-645-8366
Email: charitablesolicitations@columbus.gov

Requirements:

- Roadway Solicitations Application
- Certificate of Insurance
  - In amount no less than $1 million
  - Must contain endorsement providing
- Results of Activity Form from previous year
  *Only required for renewal applicants
- Bond Form (as required per Columbus City Code 525.21 (C))
- Copy of Contract(s) under which Applicant will be soliciting contributions for Charitable Organization(s)

Fees:

Application	$20.00	Professional Fundraiser license	$150.00

*Please make checks payable to "City Treasurer – License Section"

Office Location and Hours:

4252 Groves Rd
Columbus, OH 43232

Monday – Friday
8:00 AM – 3:30 PM

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Office Use Only

License #: _____

Issue Date: _____

Exp Date: _____

THE CITY OF COLUMBUS
ANDREW J. GINTHER, MAYOR

DEPARTMENT OF BUILDING AND ZONING SERVICES

Roadway Solicitations Application

Address: 4252 Groves Road, Columbus, Ohio 43232
Phone: 614-645-8366
Email: charitablesolicitations@columbus.gov

☐ New ☐ Renewal

Organization Information:

Full Official Name: _____ Federal ID #: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone #: _____ Email: _____

Does this organization currently hold a valid Charitable Solicitations license?

☐ Yes ☐ No ☐ Pending Approval If yes, please provide license #: _____

Has this organization previously held Roadway Solicitations license?

☐ Yes ☐ No If yes, date of most recent issuance: _____

Is this organization registered with the State of Ohio under the provisions of ORC 1716.02?

☐ Yes ☐ No If yes, registration #: _____

Event Information:

Date of Event: _____ Time(s) of event: _____

Location(s) where soliciting:

_____

_____

Applicant Information:

Name: _____ Title: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Driver License #: _____ State: _____

Phone #: _____ Email: _____

Please attach a list of solicitors who will be associated with or participating in said event.

Will this event cause excessive traffic congestion or hazards or conflict with another scheduled parade or scheduled event? ☐ Yes ☐ No

Will you inform the City of the net proceeds resulting from this event within sixty (60) days? ☐ Yes ☐ No

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Certain information in this application is subject to disclosure as a matter of public record. Any false statement made or given in this application shall result in denial or future revocation of this permit, as well as criminal prosecution under Columbus City Code 2321.13 (A)(3) and (A)(5).

I hereby acknowledge the above statement regarding public records disclosure by checking this box. ☐

If you or a member of your immediate family is a designated public service worker employed in a position as listed under ORC 149.43 (A)(7), please provide a form of proof, along with the name and primary residence of said person: _____

State of _____, County of _____:

_____, bring duly sworn, deposes and says he or she is the
Print Applicant Name

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

_____
Applicant Signature

Sworn to before me and subscribed in my presence, this _____ day of _____, _____

_____
Notary or Agent of Director of Building and Zoning Services