

APPLICATION FOR ORIGINAL REGISTRATION—OUTFITTER

APPLICANT INSTRUCTIONS

Mandatory Practice Act. Colorado has a mandatory practice act, which means that you may not practice as an Outfitter in this state without a Colorado registration. Submission of this application does not guarantee registration. Therefore, do not make life or career decisions based on the probability that you may receive a registration. Plan ahead for the time it will take for us to receive all required documents and complete our evaluation.

- You must possess a current certificate of registration before advertising or representing yourself as an Outfitter. Submitting an application does not entitle you to solicit or provide outfitting services.
- Be aware that receiving an Outfitter registration from this office does not guarantee that you will be granted land use permits from the U.S. Forest Service, Bureau of Land Management, or other agencies responsible for public lands. Check with the appropriate local offices for information regarding availability of permits.

Basic Requirements. Requirements for registration are outlined in the Colorado Revised Statutes, specifically 12-55.5-101, and the Rules and Regulations of the Colorado Office of Outfitters Registrations. Both are available online at www.dora.colorado.gov/professions/outfitters.

About the Application. This application is to be completed by you and returned to the Office of Licensing. All questions on the application are mandatory, and all supporting documents must be submitted with the application. You may copy as many forms as needed; however, each form submitted must be completed in original ink or typed. Keep a copy of the completed application for your records.

Application Expiration. Your application will be kept on file for one year from date of receipt. Your file and all supporting documentation will be purged if you do not submit required documents and complete your application process in one year. You will need to resubmit a new application packet and fee after that time.

Social Security Number is Required. Effective January 1, 2009, a Social Security Number is required for all licensees and registrants. The Division will consider an application to be incomplete when the applicant fails to submit his/her Social Security Number. Exceptions are made for foreign nationals not physically present in the United States and for non-immigrants in the United States on student visas who do not have a Social Security Number. These applicants must submit a signed Social Security Number Affidavit in lieu of a Social Security Number. You may call (303) 894-7800 to request that one be mailed to you.

Disclosure of Addresses. Consistent with Colorado law, all addresses and phone numbers on record with the Division are public record and must be provided to the public when requested. It is your responsibility to keep your address, phone numbers and contact information up-to-date in our database. All letters, renewal notices, and licenses are mailed to the last known address of record. **If your address is not current, it is possible you will not receive important documents.** You can change your address online by using Online Services at www.dora.colorado.gov/professions/onlineservices.

Registration Expiration Grace Period for New Applicants. All new applicants who are issued a registration within 120 days of the upcoming renewal expiration date will be issued a registration with the subsequent expiration date. For example, registrations issued between December 1, 2012 and March 31, 2013 will reflect a license expiration date of March 31, 2014. Registrations issued prior to December 1, 2012 will reflect an expiration date of March 31, 2013 and must renew in the upcoming renewal period.

- All Colorado Outfitter registrations expire on March 31 each year and must be renewed to continue practicing.

Checking Your Application Status. Visit Online Services at www.dora.colorado.gov/professions/onlineservices to track your application from the date we log it in our database to the date your license is printed. Please allow us enough time to receive the application through the mail and enter your application into our database before you check the website. We recommend waiting at least 10 days from date of mailing before checking the status of your application.

APPLICANT CHECKLIST

To apply for a Colorado **Outfitter** registration:

- Complete the attached application.** Return the completed application and all supporting documentation to the Office of Licensing.
- Enclose the non-refundable application processing fee.** See page 1 of the application form for current fees. Fees may be paid by a check or money order drawn in U.S. dollars on a U.S. bank and **made payable to State of Colorado**. All fees are non-refundable and subject to change every July 1.
- Complete and return the attached Affidavit of Eligibility form (individual applicants only).** Pursuant to C.R.S .24-34-107, all applicants for licensure are required to complete and sign an Affidavit of Eligibility, and may also be required to provide a copy of a secure and verifiable document.
- Provide documentation of any name change.** If your name has changed since you obtained a previously-issued license, or if your name is different on any of your supporting documentation, you must provide a copy of the legal document verifying the name change (i.e., marriage license, divorce decree, or court order).
- Submit verification of insurance.** You must possess minimum liability insurance coverage in the amount of fifty thousand dollars (\$50,000) for bodily injury to one person in any single accident and one hundred thousand dollars (\$100,000) for bodily injury to all persons in any single accident.
- Submit verification of bond.** You must possess a surety bond in the minimum sum of ten thousand dollars (\$10,000), executed by the applicant as principal and by a surety company qualified and authorized to do business in this state as surety, conditioned upon compliance with the provisions of the law and with the rules and regulations promulgated under the law.
- Submit verification of first aid training.** You must possess a valid instructor's card in first aid or standard first aid card issued by the American Red Cross or evidence of equivalent training. C.P.R. courses/cards are NOT acceptable as the equivalent to first aid.
 - Other first aid course providers include National Safety Council First Aid, E.M.T., Basic Responder, Basic Mountain Oriented First Aid, Intermediate Mountain Oriented First Aid, Certified Wilderness First Responder, Medic First Aid, Mine Safety and Health First Aid, among others.
 - You must provide proof of first aid training for every individual who will be providing guide services.

Applicants for a business registration must also:

- Complete Attachment A.** If you are applying as a corporation, LLC, LTD, or partnership, you must provide a list of all officers, directors, members, partners, owners of least 10% of the entity, and other persons who have managing or controlling authority in the entity.
- Follow these guidelines for bond and insurance:**
 - If you are applying as a corporation, LLC, or LTD, the bond and insurance must be issued to the business entity.
 - If you are applying as a partnership, the bond and insurance must list all partners as the insured bonded.

Return your completed application packet and all supporting documentation to:

Division of Professions and Occupations
Office of Licensing—Outfitters
1560 Broadway, Suite 1350
Denver, CO 80202



IMPORTANT NOTICE

TO: All Applicants

FROM: Director of the Division of Professions and Occupations

SUBJECT: Licensure and Criminal History

Thank you for your interest in becoming a licensed* professional within the Division of Professions and Occupations. Before you submit your application, please be aware of a few facts regarding criminal conduct, convictions, and disciplinary actions in other states.

The mission of the Division of Professions and Occupations is “public protection through effective licensure and enforcement.” One way the Division safeguards consumers is by issuing licenses to fully qualified, competent, and ethical applicants.

During the licensing process – and depending on the specific application – the Division will ask whether you have ever been disciplined in any state, arrested, charged, convicted, or pled guilty to a crime. An arrest, subsequent criminal conviction, or disciplinary action is not an automatic disqualification from licensure. Instead, the appropriate board or program will look at the facts surrounding the criminal conduct and disciplinary action to determine whether you are fit for licensure. You should know that licensure is a privilege, not a right. One thing you must do to obtain the privilege is to be completely honest on your application.

Be sure to list all relevant complaints, disciplinary actions, arrests, charges, or convictions in response to the licensure questions. Failure to fully disclose could constitute grounds alone for denial of your application or revocation of your license. More important, avoid some of the common excuses we have heard from people who failed to disclose, such as:

- My attorney told me I didn’t have to disclose the criminal conduct or disciplinary actions.
- I didn’t think the prior conduct had anything to do with the profession.
- I didn’t think the disciplinary action, arrest, charges, or conviction was still on my record.
- I didn’t think it was subject to disclosure because I received a deferred sentence/judgment.

Remember, there is no excuse not to disclose disciplinary actions and criminal conduct. Even after licensure, you are still required to notify your professional licensing board or program about subsequent convictions and disciplinary actions in other states.

The Division conducts audits of its licensing database against several criminal and national disciplinary databases. This allows the Division to verify the truthfulness of your application and track subsequent criminal and disciplinary conduct after initial licensure. Keep in mind, you will not necessarily be revoked or denied a license if you have been disciplined, arrested, charged or convicted, but you will most likely be denied or revoked if you fail to disclose it.

**The word "license" is used as a general term. While most of the professions and occupations are licensed, others may be registered, certified, or listed. For precise terminology and requirements related to a profession or occupation, please consult the [website](#) of the appropriate board or program.*



Colorado Department of Regulatory Agencies
 Division of Professions and Occupations
 1560 Broadway, Suite 1350
 Denver, CO 80202

Licensee/Applicant Full Legal Name

Last	First	Middle	Suffix

Colorado Professional or Occupational License/Certification/Registration Number: _____
 (if already licensed)

Professional or Occupational License/Certification/Registration type applying for: _____

AFFIDAVIT OF ELIGIBILITY

Pursuant to H.B. 06S-1009, C.R.S. 24-34-107, ALL applicants for original licensure* or licensees renewing or reinstating a current Colorado license after January 1, 2007 are required to complete and sign this Affidavit of Eligibility.

**The word "licensure" is used as a general term. While most of the professions and occupations are licensed, others may be certified, registered, or listed. For precise terminology and requirements related to a profession or occupation, please consult the website of the appropriate board or program.*

Section A: LAWFUL PRESENCE in the United States

1. I am a U.S. citizen. Check one of the acceptable secure and verifiable documents in Section B that applies and fully complete the information requested. Complete documentation must be provided upon request.
2. I am not a U.S. citizen, but I am lawfully present in the U.S. and authorized by the Department of Homeland Security to be employed in the U.S. Check one of the acceptable secure and verifiable documents in Section B that applies and fully complete the information requested. Complete documentation must be provided upon request.
3. I am not physically present in the U.S. under 8 U.S.C. sec. 1621 (c)(2)(c) or employed in the U.S. pursuant to 8 U.S.C. sec. 1621 (c)(2)(a). Check one option, a or b below, then skip to Section C. (Do not complete Section B.)
 - a. I am a U.S. citizen, not physically present or employed in the United States.
 - b. I am a Foreign National, not physically present or employed in the United States.

Section B: SECURE AND VERIFIABLE DOCUMENTS
 Select ONE document in this section if you checked 1 or 2 in Section A.

Government Issued Identification	Name of state agency or federal agency that issued the document	Full name as shown on driver's license or state/federal issued ID	License/ID Number	Expiration Date (mm/dd/yyyy)
<input type="checkbox"/> Driver's license or permit				
<input type="checkbox"/> Government issued ID card				
<input type="checkbox"/> Valid U.S. military ID/common access card				
<input type="checkbox"/> Colorado Department of Corrections inmate ID				
<input type="checkbox"/> Tribal ID card				
<input type="checkbox"/> U.S. passport				
<input type="checkbox"/> Certificate of Naturalization				

Section B: SECURE AND VERIFIABLE DOCUMENTS (continued)

Government Issued Identification	Name of state agency or federal agency that issued the document	Full name as shown on driver's license or state/federal issued ID	License/ID Number	Expiration Date (mm/dd/yyyy)	
<input type="checkbox"/> Certificate of (U.S.) Citizenship					
<input type="checkbox"/> Valid Temporary Resident card					
<input type="checkbox"/> Valid I-94 issued by Canadian government					
<input type="checkbox"/> Valid I-94 with refugee/asylum stamp					
<input type="checkbox"/> Valid I-766 (Employment Authorization Card)			Issuing federal agency:		
Name on card	Alien Number (A#)	Card Number	Valid from (mm/dd/yyyy)	Expires (mm/dd/yyyy)	
<input type="checkbox"/> Valid I-551 (Resident Alien or Permanent Resident Card)			Issuing federal agency:		
Name on card	Alien Number (A#)	Country of birth	Card expires (mm/dd/yyyy)	Resident since (mm/dd/yyyy)	
<input type="checkbox"/> Valid foreign passport with an unexpired visa with proper classification for work authorization, and an unexpired I-94					
Issuing foreign country	Passport Number	Visa Number	Visa Class (ex.: J-1, P-1, H-1B, etc.)	Date of entry (mm/dd/yyyy)	Until date (mm/dd/yyyy)
<input type="checkbox"/> Valid foreign passport bearing an unexpired "Processed for I-551" stamp or with an attached unexpired "Temporary I-551" visa					
Issuing foreign country:			Passport Number:		

Section C: ATTESTATION

- I understand that this sworn statement is required by law because I have applied for or hold a professional or commercial license regulated by 8 U.S.C. sec. 1621. I understand that state law requires me to provide proof that I am lawfully present in the United States when asked as well as submission of a secure and verifiable document. I may also be required to provide proof of lawful presence.
- I understand that in accordance with sections 18-8-503 and 18-8-501(2)(a)(I), C.R.S., false statements made herein are punishable by law. I state under penalty of perjury in the second degree, as defined in 18-8-503, C.R.S. that the above statements are true and correct.
- I am the person identified above and the information contained herein is true and correct to the best of my knowledge. I understand that under Colorado law, providing false information is grounds for denial, suspension or revocation of a license, certificate, registration or permit.
- I understand that the above information must be disclosed to the Department of Regulatory Agencies upon request and is subject to verification.

Print Full Legal Name

Signature (Full Name)

Date

The content of this application must not be changed. If the content is changed, the applicant may be referred to the Colorado State Attorney General's Office for violation of Colorado law.

Fees may be paid by check or money order drawn in U.S. dollars on a U.S. bank and made payable to *State of Colorado*.

[Check only one] **I am applying as an:**

Individual

—OR— **I am applying as a business:**

Partnership Corporation LLC LTD

Other (specify): _____

PART 1—INDIVIDUAL APPLICANTS ONLY

Name: Last:		First:	Middle:	Suffix:
Previous Name(s):				
Social Security Number: *		Date of Birth (mm/dd/yyyy):		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Place of Birth (city and state, or foreign country):				
Mailing Address:		PO Box, Street:		
This is a <input type="checkbox"/> Home <input type="checkbox"/> Business		City, State, Zip:		
Daytime Telephone Number: ()		E-mail Address:		
		Preferred method for communication: <input type="checkbox"/> Mail <input type="checkbox"/> E-mail		
DBAs (list all. If needed, attach an additional sheet).				

*Social Security Number Disclosure: Section 24-34-107(1) of the Colorado Revised Statutes requires that every application by an individual for a license issued pursuant to the authority set forth in title 12, C.R.S., by the Department of Regulatory Agencies, shall require the applicant's social security number. Disclosure of your social security number is mandatory for purposes of establishing, modifying, or enforcing child support under § 14-14-113 and § 26-13-126, C.R.S.; and locating an individual who is under an obligation to pay child support as required by § 26-13-107(3)(a)(I)(A), C.R.S. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Disclosure of your social security number is voluntary for disclosure to other state regulatory agencies, testing and examination vendors, law enforcement agencies, and other private federations and associations involved in professional regulation for identification purposes only. Your social security number will not be released for any other purpose not provided for by law.

OFFICE USE ONLY **REGISTRATION NUMBER:** _____ **DATE ISSUED:** _____

PART 2—BUSINESS APPLICANTS ONLY

Business Name and DBAs (list all. If needed, attach an additional sheet).	
Federal Employer Identification Number (FEIN):	
Mailing Address: PO Box, Street: <i>This is a</i> <input type="checkbox"/> <i>Home</i> <input type="checkbox"/> <i>Business</i> City, State, Zip:	
Physical location of business: Street: City, State, Zip:	
Daytime Telephone Number: ()	E-mail Address: <i>Preferred method for communication:</i> <input type="checkbox"/> <i>Mail</i> <input type="checkbox"/> <i>E-mail</i>
Name of Responsible Individual: (for Corporation, LLC, or LTD)	
Name(s) of Partner(s) (for Partnerships only. List all. Attach an additional sheet if needed):	

PART 3—REGISTRATION INFORMATION

Are you now or have you ever been licensed to practice as an outfitter or guide in any state, territory, or district? YES NO

➤ If **YES**, list each jurisdiction, other than Colorado, in which you are or have been registered or licensed as an outfitter. If needed, attach an additional sheet using the same format.

State/Country	Registration/License Number	Year registration/license issued	Disciplinary action against registration/license?	Is this registration/license current/active?
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

Are there any pending complaints against you in any other jurisdictions? YES NO

➤ If **YES**, provide an explanation:

Have you ever filed a license application in Colorado? YES NO

➤ If **YES**, give date of previous application:

PART 4—LAND USE

An outfitter's registration shall be valid only upon lands where the Outfitter has a current valid permit from the appropriate state or federal agency, or, in the case of private land, written consent from the landowner or person authorized to grant permission to trespass upon private lands for the sole purpose of hunting or fishing.

List Game Management Unit numbers where hunting or fishing services will be provided:

Operations will be conducted on [check all that apply]:

Private Land

Name of legal owner of property and/or person(s) responsible:

Contact Address: PO Box, Street:
City, State, Zip:

County in which property is located:

Public Land

Name of Agency and Office granting authority:

Area of Operations (Boundaries and County in which property is located):

PART 5—SCREENING QUESTIONS

Completely answer the following questions for yourself, and all partners or officers of your business (if applicable).

1. Have you purchased, or are you purchasing an existing outfitting business? YES NO

➤ If **YES**, list the previous owner's name and DBA: _____

2. Were you previously employed by a registered outfitter, or do you now have or have you previously had a business or personal relationship with an individual who is now or was previously an outfitter? YES NO

➤ If **YES** to either question, please explain (include names, dates, and relationships): _____

Provide the following for each "YES" response to the screening questions below:

- An explanation, signed and dated by you, of your behavior or practice that led to the occurrence, including:
 - Date(s) of event/offense
 - Description of event/offense
 - Location/court
 - Current status/outcome

You may be required to provide the following:

- Copies of legal documents relating to the event/offense.
- Copies of legal documents indicating your compliance with any requirements imposed upon you.

3. Within the last 10 years, have you been found guilty of or admitted guilt to a violation of the laws or rules and regulations pertaining to the Colorado Division of Wildlife, United States Forest Service, Bureau of Land Management, or any other local, state, or federal wildlife or land management agency in Colorado or any other state? YES NO

PART 5—SCREENING QUESTIONS (Continued)

- 4. Within the last 10 years, have you received a deferred judgment or paid a collateral forfeiture as a result of any violations pertaining to any of the aforementioned agencies? YES NO
- 5. Are there any pending charges against you not yet resolved involving any of the aforementioned agencies? YES NO
- 6. Within the last 10 years, have you been found in violation of or admitted to violation of any of the laws or rules and regulations governing the practice of outfitting, guiding, hunting, or fishing in Colorado or any other state? YES NO
- 7. Are there any pending charges against you not yet resolved alleging violation of outfitting, guiding, hunting, or fishing laws or regulations? YES NO
- 8. Have you ever been convicted, pled *nolo contendere* or guilty to a felony? YES NO

ATTESTATION

I state under penalty of perjury in the second degree, as defined in C.R.S. 18-8-503, that the information contained in this application is true and correct to the best of my knowledge. In accordance with C.R.S. 18-8-501(2)(a)(I), false statements made herein are punishable by law and may constitute violation of the practice act.

I understand that I must comply with all laws and rules and regulations governing outfitters and that failure to do so may result in denial, probation, suspension or revocation of registration, or fines as set forth in the law.

Applicant Signature

Date

Partner Signature

Date

Partner Signature

Date

ATTACHMENT A
Complete this form if applying as a Corporation, LLC, LTD, or Partnership

Pursuant to C.R.S. 12-55.5-105, an application for registration of an entity shall include the names of all officers, directors, members, partners, owners of at least ten percent (10%) of the entity, and other persons who have managing or controlling authority in the entity.

Complete the following information for ALL officers, partners or other individuals (including yourself) who share in control or operation of your outfitting business. Attach a separate sheet if necessary.

Name	Title or Office Held	Address	Date of Birth	Social Security Number*	Driver's License Number and State of Issuance	Provide Guide Service?
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO
						<input type="checkbox"/> YES <input type="checkbox"/> NO

You must enclose **proof of first aid training** for any individual who will be providing guide services.

*Social Security Number Disclosure: Section 24-34-107(1) of the Colorado Revised Statutes requires that every application by an individual for a license issued pursuant to the authority set forth in title 12, C.R.S., by the Department of Regulatory Agencies, shall require the applicant's social security number. Disclosure of your social security number is mandatory for purposes of establishing, modifying, or enforcing child support under § 14-14-113 and § 26-13-126, C.R.S.; and locating an individual who is under an obligation to pay child support as required by § 26-13-107(3)(a)(I)(A), C.R.S. Failure to provide your social security number for these mandatory purposes will result in the denial of your licensure application. Disclosure of your social security number is voluntary for disclosure to other state regulatory agencies, testing and examination vendors, law enforcement agencies, and other private federations and associations involved in professional regulation for identification purposes only. Your social security number will not be released for any other purpose not provided for by law.

CONTRACT REQUIREMENTS

All contracts must meet specific requirements set forth in the Outfitters Registration Statute and in the Rules and Regulations. When you are developing a contract for use with clients or potential clients, please ensure that all the following requirements have been met. A sample contract and more information are available on our website at www.dora.colorado.gov/professions/outfitters.

From the Outfitters Registration Statute:

1. Outfitters must provide written contracts to their clients, and the contracts must be signed by both the outfitter and client. Section 12-55.5-109(1), C.R.S. (*Individual outfitters must use their own signatures, and if the outfitter is a partnership or corporation the contract must be signed by one of the responsible partners or corporate officers listed in the Office's registration file.*)
2. Outfitter contracts must include all of the following information: Section 12-55.5-109(1), C.R.S.
 - a. Types of services to be provided (*This needs to be descriptive, i.e. fully guided hunt, "drop camp only, what species, fishing instruction only, etc.*);
 - b. Dates of service (*Should be specific dates, i.e. October 12-17, not simply "third season"*);
 - c. Transportation arrangements (*Should include transportation of individuals from a specific location to a specific location, i.e. from the Grand Junction airport to the trailhead or base camp. Should also include arrangements for transporting equipment, supplies of wildlife to and from the hunt location. Even if no transportation will be provided, contract should indicate .N/A.*);
 - d. Cost of the services;
 - e. Ratio of clients to guides (*Even if the service is for a "drop camp" only and there will be no guides, the contract must indicate that there are no guides*);
 - f. The outfitter's policy regarding cancellation of the contract and refund any deposit.
3. No action may be maintained by an outfitter for breach of a contract or agreement to provide outfitting services or for the recovery of compensation for services rendered under such contract or agreement if the outfitter has failed to comply with the provisions of this article. Section 12-55.5-109(2), C.R.S.
4. Any written contract provided pursuant to this section shall also contain a written statement that pursuant to Section 12-55.5-105(1)(c) and (1)(d) outfitters are bonded and required to possess the minimum level of liability insurance and that the activities of outfitters are regulated by the Director of the Division of Professions and Occupations in the Department of Regulatory Agencies. Section 12-5.5-109(3), C.R.S.

From the Rules and Regulations:

1. A written contract as defined in Section 12-55.5.109, C.R.S., shall be provided to the client within thirty (30) days of receipt and acceptance of a deposit from the client. Rule D-8
2. Any deposit made by a client who is not accepted must be returned within thirty (30) days. Rule D-8
3. For any contract executed on or after January 1, 2001, in addition to the basic refund policy language, the contract shall include language which defines the refund policy when the prospective client does not draw the required license or tag for the species he is negotiating to hunt, and shall specify the location or locations of the actual hunt using game management units assigned by the Division of Wildlife. Rule D-8
4. A copy of the contract shall be provided to the Director or authorized agent upon request. Rule D-8 and Rule D-14
5. An outfitter shall honor the terms of his contractual obligations to his clients. If the outfitter is unable to honor the terms of his contract for any reason, including active suspension or revocation of the outfitter's registration, each client shall be notified immediately. Rule D-11
6. An outfitter shall maintain accurate and complete records of all outfitting services, including copies of contracts with clients, and the outfitter shall provide such records to the Director or authorized agents upon request. Rule D-14(i)