



**OFFICE OF THE ATTORNEY GENERAL**

**Raúl R. Labrador**

**Consumer Protection Division**

954 W. Jefferson St., 2<sup>nd</sup> Floor

P.O. Box 83720

Boise, ID 83720-0010

(208) 334-2424

**Telephone Solicitor  
Registration Form**

Annual Registration Fee: \$50.00 (non-refundable)

Annual Renewal Registration Fee: \$25.00 (non-refundable)

**OFFICE USE ONLY**

RECEIVED

**IMPORTANT: BEFORE YOU BEGIN:**

- **Determine if you need to register.** Idaho law requires ***“telephone solicitors”*** to register with the Attorney General’s Office before conducting ***“telephone solicitations”*** in Idaho. If you are unsure if you are considered a telephone solicitor under the Idaho Telephone Solicitation Act (ITSA), contact an attorney who is knowledgeable about the ITSA.

<b>Today’s Date:</b>		<b>Telephone Solicitor’s Name:</b>	
<b>Telephone Solicitor’s Business Name:</b>			
<b>Mailing Address:</b>			
<b>Telephone No.:</b>		<b>Website:</b>	
<b>Business Email:</b>			
<b>Contact for Questions:</b>			
<b>Telephone No.:</b>		<b>Email:</b>	
<b>Is this registration new or an annual renewal?</b>			
		<input type="checkbox"/> New (\$50)	<input type="checkbox"/> Annual renewal (\$25)

**1. What is the name of the business that the telephone solicitor will use when calling Idaho consumers?**

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**2. Identify the legal status of the telephone solicitor.**

<input type="checkbox"/> Corporation	State of Organization:
<input type="checkbox"/> Limited Liability Company	State of Organization:
<input type="checkbox"/> Limited Liability Partnership	State of Organization:
<input type="checkbox"/> Assumed Business Name	State of Registration:
<input type="checkbox"/> Other:	State of Organization:

**3. If applicable, identify the parent company of the telephone solicitor.**

<b>Mailing Address:</b>	<b>Physical Address:</b>

**4. If applicable, identify companies that are affiliates of the telephone solicitor and assume responsibility for the telephone solicitor's representations to purchasers (attach sheets if necessary).**

(a)	
<b>Mailing Address:</b>	<b>Physical Address:</b>
(b)	
<b>Mailing Address:</b>	<b>Physical Address:</b>

5. Identify the physical address and the person in charge of each location where the telephone solicitor conducts its own telephone solicitations (NOT through a third-party telemarketer). (attach additional sheets)

Location No. 1	Location No. 2
Person in Charge of Location No. 1	Person in Charge of Location No. 2
Name:	Name:
Title:	Title:
Phone No.:	Phone No.:

**IMPORTANT: BEFORE YOU CONTINUE**

- The following is a checklist of documents that you must include with this Application.
- You must organize and label each document clearly and conspicuously. Our office is not responsible for lost, misplaced, unlabeled, or improperly labeled documents.
- If the telephone solicitation scripts or sales materials reference multiple states, you must highlight and conspicuously tag the portion of the document that is specific to Idaho law.



**Document Description**

**Exhibit No.**



**Business Organization Filings:**

**1**

Articles of Incorporation; Bylaws; Amendments

Articles of Organization

Partnership Agreement

Fictitious Business Name Registration



**Telephone Solicitation Scripts Used in Idaho (Notice of Cancellation, state that purpose of the call is to make a sale, and include Telephone Solicitation Registration Number or a space to add the number when received)**

**2**



**Sales/Training Materials Provided to Sales Representatives**

**3**



**Mailers, Written or Oral Ads, Webpages, Sales Materials, Contracts, Invoices, Receipts, with Notices of Cancellation and Telephone**

**4**

Solicitation Registration number or a space to add the number when received. (before solicitation & after solicitation/sale)	
<input type="checkbox"/> Telephone Solicitor's Irrevocable Consent to Service of Process (see attached form)	5

### **SIGNATURES**

I/WE DECLARE THAT ALL INFORMATION CONTAINED IN THIS FORM AND ALL DOCUMENTS ATTACHED AS EXHIBITS TO THIS FORM ARE TRUE AND CORRECT.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\* \* \*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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Print Name

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Title

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Signature

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Print Name

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Title

\* \* \*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

## EXHIBIT 5

### STATE OF IDAHO OFFICE OF THE IDAHO ATTORNEY GENERAL CONSUMER PROTECTION DIVISION

#### TELEPHONE SOLICITOR'S IRREVOCABLE CONSENT TO SERVICE OF PROCESS

This consent is filed with the Consumer Protection Division of the Office of the Attorney General for the State of Idaho pursuant to Idaho Code § 48-1004(1)(b) on behalf of:

(Insert Name of Telephone Solicitor Business Name from Page 1)

The above-identified telephone solicitor irrevocably appoints the Idaho Attorney General or his/her successor in office as attorney to receive service of any lawful process in any noncriminal suit, action, or proceeding against the telephone solicitor, or the telephone solicitor's successor, executor or administrator, which may arise under the Idaho Telephone Solicitation Act or regulations promulgated thereunder.

When such service of process is made upon the Office of the Attorney General, it shall have the same force and validity as if served personally on the telephone solicitor. Pursuant to Idaho Code § 48-1006(3)(d), a notice of such service and a copy of the process is to be mailed by the plaintiff in such action to the name and address set forth below.

The telephone solicitor understands that it is responsible for updating this information when changes occur.

**Person's Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_