



“DO NOT SOLICIT” REGISTRATION FORM

Date: _____

Name of Person Submitting Form: _____

Renter ☐ **If renter, provide owner information below**

Owner ☐

Owner Name: _____

Owner Mailing Address: _____

Owner Phone Number: _____

Black Hawk Street Address(es) to be added to list: _____

Requester's Phone Number: _____

I agree to allow the City of Black Hawk to add my Black Hawk address to their “Do Not Solicit” List for Commercial Solicitation and I understand that it will be added to their website.

Signature

Date

*Registration shall take effect thirty (30) calendar days after the date of the City's receipt of this registration form and shall remain in effect until cancelled by the owner or occupant, or until the person filing the form ceases to be the owner or occupant of the property, whichever occurs soonest.