

**BUSINESS LICENSE APPLICATION****CITY OF DOUGLAS**

Location: 425 E. 10th Street

Mail to: 425 E. 10th Street

Douglas, AZ 85607

(520) 417-7333

Melissa.Grijalva@douglasaz.gov

LICENSE NO. _____

EACH SECTION OF THIS APPLICATION MUST BE COMPLETED BEFORE A LICENSE WILL BE ISSUED.

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Check One: ☐ New Business		Former Owner (If Applicable):		Application Date:	
☐ New Owner of Existing Business				Start Date:	
For Changes To Existing Licenses: ☐ Name Change Only ☐ Location Change ☐ Change Corporate Officers		Current City License#:		Date of Change:	
SECTION I. BUSINESS LOCATION INFORMATION				License Type: OBL	
Business Name:				Application & License Fee	
Street Address: Suite or Apt. #				License #	
City:		State:	Zip	Business Telephone#:	
E-Mail Address:				Business Fax #	
SECTION II. MAILING ADDRESS				Approvals	
Enter name if Different From Section I (above) or Enter "In-Care-of" Name:				Finance Department A D	
Address				Planning/Zoning Department A D	
City		State	Zip	Fire Department A D	
SECTION III. BUSINESS OWNERSHIP & RECORD LOCATION				Backflow/Grease/Sand A D	
Ownership: ☐ Individual ☐ LLC ☐ Corp. ☐ Gen Partnership ☐ S Corp. ☐ Other/Non-Profit If LLC do you file with IRS as: ☐ Sole Proprietor ☐ Corporation					
If Corporation or LLC, it must be registered with the Arizona Corporation Commission.					
Contact person or owner		Name:		Day Time Phone #:	
Corporation or LLC if different than DBA				Night Phone #:	
Corporate or LLC Statutory Agent		Name and Address:		Phone #:	
SECTION IV. BUSINESS TYPE					
Business Type		☐ Retail ☐ Restaurants/Bars ☐ Rental of Tangible Personal Property	☐ Amusements ☐ Taxi/Shuttle ☐ Hotel/Motel	☐ Other/Services ☐ Wholesaler ☐ Home Occupation	☐ Rental of Real Property ☐ Construction Contracting Roc#
Describe in detail business activity:				NAICS Code:	
SECTION V. BUSINESS PREMISES STATUS					
CHECK ONE:		Is your business location your residence?		☐ Yes ☐ No	
☐ In City		Do you rent/lease commercial property from another?		☐ Yes ☐ No	
☐ Out of City		If yes to either of these, please complete the Landlord/Property Information.			
		Landlord/Property Manager Name:		Address:	
				Phone #:	
		Do you rent a portion of the business premises to another entity?		☐ Yes ☐ No	
		If YES, please list the name and telephone of the other entity:			

Check method you will use in submitting reports:

Cash Receipts ☐Accrual ☐

PLEASE LIST ALL VEHICLES TO BE USED BY YOUR BUSINESS (MOBILE VENDORS ONLY):

LIC PLATE NO.	MAKE	MODEL	YEAR

Number of employees: *****For a Listing of NAICS Codes visit www.aztaxes.gov and click on "Business Tax Description Codes"

The following information is confidential:

Az State Transaction Privilege Tax License #	Federal ID# or SS#	Health Permit #
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*******(COPY OF STATE LICENSE REQUIRED)*******

Owners, Partners, LLC Members, or Officers (For Additional Names Please Attach List)	Name:		Title	Date of Birth:
	Home Address:			Drivers License#:
	City:	State:	Zip Code:	Phone #:
	Name:		Title	Date of Birth:
	Home Address:			Drivers License#:
	City:	State:	Zip Code:	Phone #:

IMPORTANT NOTICE:

COMPLETION OF THIS FORM DOES NOT CONSTITUTE APPROVAL OF LICENSE. BUSINESS CANNOT START UNTIL BUSINESS LICENSE IS ISSUED
ISSUANCE OF A CITY BUSINESS LICENSE DOES NOT RELIEVE THE APPLICANT OF THE RESPONSIBILITY OF COMPLYING WITH THE VARIOUS
CITY CODES. IF YOU ARE UNSURE OF SPECIFIC CODE REQUIREMENTS, PLEASE CONTACT PLANNING & ZONING AND FIRE DEPARTMENTS.
ALSO BE SURE THAT ALL CITY TRANSACTION PRIVILEGE (SALES) TAX AND TRANSIENT OCCUPANCY TAX HAS BEEN PAID BY THE FORMER
BUSINESS OWNERS. UNDER THE CITY CODE YOU ARE LIABLE FOR ANY UNPAID TAXES.

Applicant's Signature	Title	Date
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PLEASE NOTE: Additional Information Required.

<u>New Business</u>	Type of Ownership	<u>Additional Requirements</u>
	Individual	Copy of owners U.S. issued picture identification.
	Partnership	Partnership Agreement & copy of partners picture I.D.(US issued)
	LLC	Copy of Arizona Articles of Organization. (Foreign LLC must be registered with the ACC)
	Corporation	Copy of Arizona Articles of Incorporation. (Foreign Corporations must be registered with the Arizona Corporation Commission)
<u>New Owner of Existing Business</u>		
	Individual	Letter or Bill of Sale from prior owner and copy of new owners US issued picture ID.
	Partnership	Letter or Bill of Sale from prior owner, partnership agreement and copy of new owners' picture ID.
	LLC	Letter or Bill of Sale from prior owner and copy of the Articles of Organization.
	Corporation	Letter or Bill of Sale from prior owner and copy of the Articles of Incorporation.

Fees

A **\$20.00** (non-refundable) initial application fee for all general businesses **plus** applicable license fees based on the number of employees working inside the city limits as listed below.

Fee Type	Amount
Application Fee	\$20.00
Business License	\$75.00/ year, up to 3 Employees
Additional Full Time Equivalent (FTE) Employees	\$20.00
Change of Business Name	\$10.00
Change of Location	\$25.00