



TOWN OF GILA BEND BUSINESS LICENSE APPLICATION

644 W PIMA ST, PO BOX A * GILA BEND, AZ 85337 *

(928) 683-2255 * Fax (928) 683-6430

* Indicates REQUIRED Information

License# _____

The Town of Gila Bend requires that anyone doing business within the Town limits must have a current Town of Gila Bend Business License. Business licenses are based on the Fiscal Year July 1st of the current year through June 30th of the following year and must be renewed by June 30 each year.

* SECTION A – BUSINESS INFORMATION *

1. Legal Business Name *	
2. Physical Location of Business* (Street Address, City, State, Zip) (Cannot be a PO Box or mailbox store address)	
3. Business Phone Number *	
4. Mailing Address (Address, City, State, Zip)* *Business License will be sent to this address*	
5. Email Address *	
6. Company Website Address	7. Number of Employees at Gila Bend location
8. Name and Title of Point of Contact for the Business *	
9. Point of Contact Phone Number & Email *	
10. Start Date of Business/Activity in Gila Bend *	
11. Corporate Name	
12. Corporate Address (Street Address, City, State, Zip)	
13. Corporate Phone Number	
14. Type of Ownership *	<input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Other
15. Enter Certificate / License Number(s) AND provide copies of the following items (if applicable to your business type)	

Arizona Transaction Privilege Tax (Sales Tax) *	<input type="checkbox"/> Copy	License #
ROC *	<input type="checkbox"/> Copy	License #
Liquor License – State of Arizona *	<input type="checkbox"/> Copy	License #

PLEASE INCLUDE A COPY OF YOUR TRANSACTION PRIVILEGE TAX (TPT) LICENSE. All businesses that are required to collect sales tax must have an Arizona TPT number issued by the AZ Dept. of Revenue.

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* SECTION B – NATURE OF BUSINESS OR GOODS SOLD *
(Please specify the nature of the business, type of goods sold or specific project) *

* SECTION C – BUSINESS CATEGORY (Check all that apply) *

<input type="checkbox"/> Bank / Mortgage / Investment	<input type="checkbox"/> Contractor / Builder
<input type="checkbox"/> Door to Door Sales (Complete Section I)	<input type="checkbox"/> Home-Based Operations (Complete Section F)
<input type="checkbox"/> Hotel / Motel	<input type="checkbox"/> Insurance Services
<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Medical Services
<input type="checkbox"/> Mobile Vendors (Complete Section G)	<input type="checkbox"/> Non-Profit (Business License is not required)
<input type="checkbox"/> Ranch	<input type="checkbox"/> Realtor
<input type="checkbox"/> Rental & Leasing (Complete Section H)	<input type="checkbox"/> Restaurant / Bar / Coffee
<input type="checkbox"/> Retail	<input type="checkbox"/> Roping & Rodeo
<input type="checkbox"/> Service	<input type="checkbox"/> Services and Retail
<input type="checkbox"/> Shuttle / Taxi	<input type="checkbox"/> Utilities
<input type="checkbox"/> Wholesale	<input type="checkbox"/> Other

* SECTION D – TYPE OF LICENSE *

- New Business License (No Liquor) – July 1 – December 31 - \$100
- New Business License (No Liquor) – January 1 – June 30 - \$50
- New Business License (Liquor) – July 1 – June 30 - \$250
- Peddler-Door-to-Door Sales – \$100 per day per vendor/employee

Additional fees may apply please contact Town Clerk at 928-683-2255 for more information.

SECTION E – CHANGE IN BUSINESS LICENSE

- Change in Business Address – Complete Section A with new address
- Change in Business Name – Complete Section A with new name
Former Name of Business (If Different)
- Business Acquisition – Date Acquired _____
Former Name of Business (If Different)
- Added Business Activity at Same Location – Complete Sections A-C listing all business activity

SECTION G – MOBILE VENDORS (MUST provide copies of ALL of the following documents)

<input type="checkbox"/> County Health Inspection (If food vendor)	<input type="checkbox"/> Driver's License of Driver
<input type="checkbox"/> License Plate No.	<input type="checkbox"/> Photograph of Mobile Sales Unit
<input type="checkbox"/> Letter from private property owner for permission to operate on their property.	

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SECTION I – PEDDLERS (DOOR TO DOOR SALES)

The Sponsoring Business must provide a signed letter detailing the proposed activity (i.e. advertising, sales, soliciting, etc.) with this business license application. All persons selling in Town must keep a copy of the signed letter and the business license with them at all times that they are selling.

Please list the times and dates for sales:

Please list the information below for each person who will be on the streets selling (attach additional sheets if needed) and include a copy of their driver's licenses.

Name	Date of Birth	Phone Number	Driver's License #
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Residential Address (Street, City, State and Zip)

List any felony / misdemeanor convictions, date of conviction & grounds for such convictions (exclude minor traffic).

Name	Date of Birth	Phone Number	Driver's License #
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Residential Address (Street, City, State and Zip)

List any felony / misdemeanor convictions, date of conviction & grounds for such convictions (exclude minor traffic).

Please list the information below for all vehicles being used in Town for this business.

License Plate Number	State of License Plate	Make, Model and Color of Vehicle

* SECTION K – LICENSE ELIGIBILITY REQUIREMENTS (ARS 41-1080) *

In accordance with ARS 41-1080, individuals must present ONE of the following documents indicating that they are allowed to conduct business in the United States in accordance with federal law:

AZ Driver's License or ID License issued after 1996 or any state's driver's license that is REAL ID compliant.	Paperwork showing Corporation or LLC is in good standing with the Arizona Corporation Commission.
Driver's license issued by a state that verifies lawful presence in the United States. Does not include CA, CO, CT, DE, HI, IL, MD, NM, NV, NY, OR, UT, VT, WA	A birth certificate or delayed birth certificate issued in any State, Territory, or possession of the United States
A United States citizenship and immigration services employment authorization document or refugee travel document.	United States Passport or foreign passport with US Visa.
A United States certificate of birth abroad	An I-94 form with a photograph
A US certificate of naturalization or citizenship	A tribal certificate of Indian Blood or affidavit of birth

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* SECTION L – APPLICANT SIGNATURE *

Under penalty of perjury, I, the applicant, declare that the information provided on this application and with the attachments is true and correct. I understand that the issuance of a Business License by the Town of Gila Bend does not necessarily mean that my business has complied with County, State and/or Federal requirements which may apply to my business.

Print Name:	Title:
Signature:	Date:

FOR TOWN USE ONLY

Planning & Zoning Approval:	Date Approved:	<input type="checkbox"/> In-Town Limits <input type="checkbox"/> Out-of-Town Limits	
Building Safety Approval:	Date Approved:	Public Safety Approval:	Date Approved:
Business License Issued By:		Date Issued:	

Arizona Revised Statute § 9-495 requires in any written communication between a city or town and a person to provide the name, telephone number, and email address of the employee who is authorized and able to provide information about the communication if the communication does any of the following:

1. Demands payment of a tax, fee, penalty, fine or assessment;
2. Denies an application for a permit or license that is issued by the city or town; or
3. Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the city or town.

An employee who is authorized and able to provide information about any communication that is described above shall reply within five (5) business days after the city or town receives that communication.

Phone: 928-683-2255