

## COMMERCIAL LICENSE APPLICATION

### **Business license fees must accompany application**

For questions pertaining to this application, please call the City Clerk Department at (520) 568-9098.

### **Please Read Carefully Incomplete Applications Will Not Be Processed**

- Please type or print. Answer each question. If the questions are not applicable, put "N.A." in the appropriate space.
- Attach a copy of your Arizona Transaction Privilege (Sales) Tax (TPT) License, if your type of business is required to collect and remit sales tax. If The City of Maricopa is not included on your current TPT license as a program city, you must contact the Arizona Department of Revenue at (602) 542-4576. (See bottom for fee schedule). The business license will not be issued until the applicant has updated their TPT license with the state.
- Contractors, please attach a copy of your Arizona State Contractor's License.
- The building must have a certificate of occupancy from the Building Department.
- The Fire Department will inspect your building prior to the issuance of the business license. They will contact you for an appointment.
- If you plan to have a new sign, a permit is required through the Planning & Zoning Department.
- If liquor is involved, you must apply with the Arizona Department of Liquor Licenses and Control. The fee for your business license will be an additional \$100.00 per year.
- The owner shall inform the City of Maricopa of any changes in his/her business activities or uses 30 days prior to change.
- Attach a copy of the Pinal County health card if you will be selling edible foodstuffs.
- The Business License must be on display in the licensee's place of business. Typically the license will be issued within 10-15 working days. A license must be issued before you can lawfully engage in business in Maricopa.
- Issuance of a Business License by the City of Maricopa shall in no way be construed as permission to operate a business activity in violation of any other law or regulation to which such activity may be subject.

### **ATTENTION APPLICANT**

Issuance of a business license by the City of Maricopa does not permit full occupancy of the proposed location. The applicant is required to contact building safety for necessary permits/inspections.

### **CITY OF MARICOPA BUSINESS LICENSE FEES SCHEDULE**

The annual Business Transaction Fee is \$50.00. The fee is prorated to ½ a year. All licenses applied for after the month of June will be \$25.00\*. Licenses expire December 31 of each year.

January	\$50.00
February	\$45.83
March	\$41.67
April	\$37.50
May	\$33.34
June	\$29.17
*July-December	\$25.00

In addition to the Fifty Dollar (\$50.00) fee, every person, firm, corporation or other entity applying for a spirituous liquor license, shall tender to the city a fee of One Hundred Dollars (\$100.00).

### **ARIZONA DEPARTMENT OF REVENUE FEES**

The Arizona Department of Revenue has made it possible for you to apply and pay for a Transaction Privilege Tax License online at [www.aztaxes.gov](http://www.aztaxes.gov). At the end of the process you will be able to print a signature card which you then will attach to your City of Maricopa Business License Application. You can print a copy of their application at [www.revenue.state.az.us/tpt\\_forms.htm](http://www.revenue.state.az.us/tpt_forms.htm).



## COMMERCIAL LICENSE APPLICATION

Check One:  New Business     Existing Business     Change of Ownership     Location Change  
 Business Name Change     Other: \_\_\_\_\_

### SECTION I. BUSINESS INFORMATION

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_

AZ Transaction Privilege Tax License Number \*: \_\_\_\_\_ Contractor License Number \*: \_\_\_\_\_

Business Type:  Retail Sales     Wholesaler     Amusement     Construction Contracting     Restaurant/Bar  
 Manufacturer     Commercial Rental     Residential Rental (# of Units \_\_\_\_\_)     Hotel/ Motel     Service  
 Other \_\_\_\_\_

Describe Nature of Business: \_\_\_\_\_

**\*Must Include a Copy of License(s)**

### SECTION II. APPLICANT INFORMATION

<b>1) Owners, Partners, LLC Members, or Officers</b> (For Additional Names, Please Attach List)	_____			
	Owner or Corporation Name	Title		
	Home Address	City	State	Zip Code
	_____			
<b>2)</b>	_____			
	Name			Title
	Home Address	City	State	Zip Code
	_____			

**Check one:** Do you own your business location?  Yes     No    If no, complete Landlord/ Property Manager Information

Landlord/ Property Manager: Name	Address	Phone No.
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I certify that the statements made in this application are true and complete to the best of my knowledge. I accept the license authorized and issued in response to this application with the condition that I report timely and pay any and all taxes due by me to the city. Incomplete forms may not be processed.

Print Name	Signature	Title	Date
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**FOR OFFICE USE ONLY**

License Fee	Receipt #	License #	Zoning	Fire Department	Building Safety	Comments:
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