



**BUSINESS LICENSE APPLICATION**

\$25 APP FEE	Date App Rec'd	Check Number	Initials
--------------	----------------	--------------	----------



AP0711

City of Tucson\*\*License Section\*\*PO Box 27210\*\*Tucson AZ 85726-7210\*\* (520) 791-4566

LIC#	Activities	NAICS (s)	For Office Use Only
------	------------	-----------	---------------------

**SECTION I. BUSINESS INFORMATION** Please complete all sections below. [Print]

<input type="checkbox"/> New Business	Date Business Started in Tucson	Former Owner (if applicable)	Previous City License #	Paying #	
<input type="checkbox"/> New Owner of Existing Business					
Check any that apply:	<input type="checkbox"/> Name Change Only	<input type="checkbox"/> Corporate Name/ Officer Change Only	Current City License # (if applicable)	Date of Change	Commercial Rental
Business Name, "Company or DBA", if Individual (Last, First, Middle)					Sub-Lease
Street #	Direction	Street Name	St Title	Suite/Apt #	Booth Rental
City	State	ZIP Code + 4	(Area Code) Business Telephone #		
Fax #	E-Mail Address (If Available)	State License #	Federal ID #		

**SECTION II. MAILING ADDRESS AND TELEPHONE NUMBER**

Enter Name if Different from Section I (above) or Enter 'In-Care-Of' Name					
Street #	Direction	Street Name	St Title	Suite/Apt #	
City	State	ZIP Code + 4	(Area Code) Telephone #		

**SECTION III. BUSINESS OWNERSHIP & RECORD LOCATION**

Ownership:	<input type="checkbox"/> Individual	<input type="checkbox"/> LLC	<input type="checkbox"/> Corp. - State Inc.# _____	<input type="checkbox"/> Partnership	<input type="checkbox"/> Ltd. Partnership	<input type="checkbox"/> Other _____	**ZONING**
* Provision of your Social Security Number on this form is voluntary. It is the policy of the City of Tucson Finance Department/Treasury Division to request this information for tax collection purposes. If provided, your Social Security Number will not be released to unauthorized persons.							Approved

Owners, Partners, LLC, Members, or Officers (for additional names, please attach list)	Name	Title	Driver's License #			Denied
	Home Address					
	City	State	Zip Code + 4	(Area Code) Telephone #		
	Name	Title	Driver's License #			Comments
	Home Address					
	City	State	Zip Code + 4	(Area Code) Telephone #		
Corporation Name if different from DBA.	Name					
Location where business records are kept, if different from business location.	Address			(Area Code) Telephone #		
	City	State	Zip Code + 4			

**SECTION IV. BUSINESS TYPE**

Describe Nature Of Business	Are you a registered Contractor?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
Check method you will use to submit reports: <input type="checkbox"/> Cash Receipts <input type="checkbox"/> Accrual <input type="checkbox"/> Number of Employees	Contractors #

**SECTION V. BUSINESS PREMISES STATUS**

Is this your residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, do you own your business location? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you do not own your business location, complete Landlord/Property Manager information below.				
Landlord/Property Manager Name	Address	City	State	Zip Code + 4
(Area Code) Telephone #	Do you rent a portion of the business premises to another entity? <input type="checkbox"/> Yes <input type="checkbox"/> No			

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 of Tucson. Incomplete forms may not be processed. Applications must be signed by Corporate officer, owner, or all partners.

Print Name(s)	Signatures(s)	Title(s)	Date
Print Name(s)	Signatures(s)	Title(s)	Date

# INSTRUCTIONS FOR COMPLETING BUSINESS PRIVILEGE LICENSE APPLICATION

*Please complete all sections starting with Section I.*

## **Section I: Business Information**

### **Check Boxes**

Put a check in any of the boxes in the first two lines that apply to your business. Each block in the next two lines is self-explanatory and requires a check in the appropriate box or information.

### **Business Name**

The business name should be the DBA (Doing Business As) or if you are not using a business name, the name of the owner.

### **Business Location Address**

The address listed is your business location address. Include suite, unit, or apartment numbers. P.O. Box numbers are not accepted for business location.

### **Business Telephone**

The telephone number listed here should correspond to the business location.

### **Fax Number**

Provide the fax number for the person who should receive inquiries concerning this application.

### **E-mail Address**

Provide the E-mail address for the person who should receive inquiries concerning this application.

### **State Tax License #**

List your Arizona TPT license number if you are required to have one.

### **Federal ID #**

List your Federal Employer Identification Number. This number is required in order to use Tucson Tax and License Online.

## **Section II: Mailing Address And Telephone Number**

### **Name**

List business legal entity name if different from Section I, or "In-Care-Of" name or information. Property managers or independent tax preparers who will be receiving returns should list their name here.

### **Mailing Address**

Provide the mailing address. Note: Business license and tax billings will be sent to this address. Please include suite, unit, or apartment numbers.

### **Telephone Number**

Provide the telephone number that corresponds to the mailing location.

## **Section III. Business Ownership And Record Location**

### **Ownership**

Please indicate the type of ownership. If you mark "other" please describe. All corporations must provide: State in which incorporated, State Incorporation Number, officers' names and addresses (at least two) and statutory agent information. A Limited Liability Corporation (LLC) must have at least one member. General partnerships must provide the name of the general partner(s).

### **Owners/Partners/LLC/Members Or Officers**

List complete owner/officer/partner information as requested. Include names and titles. P.O. Box numbers are not acceptable for home addresses.

### **Corporation Name If Different From DBA**

The corporation name, if applicable.

### **Location Where Business Records Are Kept**

Complete this section if business records are not kept at the location listed in Section I.

## **Section IV: Business Type**

### **Describe Nature Of Business**

Provide a detailed description of business activity. For example, if retail sales, list type of items to be sold; if construction contracting, list type of contracting, etc. If you are doing construction contracting, please indicate your Contractor's number with Arizona Registrar of Contractors.

### **Check Method You Will Use To Submit Reports**

Check cash receipts if you recognize income and expense based upon the date you receive funds or pay bills. Check accrual method if you recognize income when earned and expense when incurred regardless of when cash is received or disbursed.

## **Section V: Business Premises Status**

### **Ownership Of Business Location**

If your business location is a residence, check "Yes" and complete the enclosed Home Occupational Form. If you answer "No", please indicate whether or not you own your business location. If you do not own your business location, please provide the name of the legal owner or property manager along with their mailing address and telephone number.

### **Application & License Fees**

Effective January 1, 2015, all applications for a City of Tucson business license must include a \$25 application fee and a \$50 annual license fee. The annual license fee is prorated by quarter. For a business starting between April 1 and June 30, the fee is \$37.50. For a business starting between July 1 and September 30, the fee is \$25.00. For a business starting between October 1 and December 31, the fee is \$12.50. If your business is engaged in an activity taxed by the City of Tucson, please contact the Arizona Department of Revenue to obtain a tax license for our city. Regulated businesses and businesses with a start date prior to January 1, 2017, may be subject to additional fees and application requirements. Contact the License Section at (520) 791-4566 for details on cases like these.

**All applications MUST be signed by either the Sole Owner, All Partners, One Corporate Officer, Trustee, or General Partner.**

**Application and annual license fees are non-refundable.**