

***** **PLEASE FILL OUT FORM COMPLETELY. DO NOT LEAVE ANY BLANKS** *****

IN CITY LIMITS

CITY OF ELOY
BUSINESS LICENSE APPLICATION
595 N "C" Street Suite # 103
ELOY, AZ 85131
Phone: 520.464.3401 Fax: 520.466.3760



TPT TAX #
TAX PRIVILEGE TRANSACTION #

Register of Contractor # (Roc)

PLEASE TYPE OR PRINT LEGIBLY:

Assessor's Parcel No: _____ (City Limits Only-License will not be issued without number)

Business Name: _____ DBA: _____

Business Location: _____ City/State/Zip: _____

Business Mailing Address: _____ City/State/Zip: _____

Business Telephone: _____ Fax: _____ Email: _____

Date Business Began: _____ Classification: Individual ____ Partnership ____ Corporation: _____

Is property location of Business owned by the Business: ____ Yes ____ No

If no, give name and address of Property Owner: _____

Previous Owner: _____ Previous Use: _____

Are you proposing new additions/changes to the Structure: ____ Yes ____ No

I Understand that the issuance of a Business License by the City of Eloy does not necessarily mean that my business has complied with County, State and Federal requirements which may apply to my business.

I Certify that the information contained on this application is true and correct to the best of my knowledge.

SIGNATURE

DATE

FOR OFFICE USE ONLY

FEE PAID ____ No ____ Yes Business Name Change \$ _____

Date paid: _____ Check ____ # _____ Cash ____ Annual \$ _____ Prorated \$ _____

DEPARTMENT	INITIALS	APPROVED	Approved w/ Conditions	DENIED
COMMUNITY DEVELOPMENT DIRECTOR				
BUILDING OFFICIAL				
P.W. DIRECTOR				
POLICE CHIEF				
CODE ENFORCEMENT				
FIRE DISTRICT				
FINANCE DIRECTOR				

Date received by Finance Department: _____

**ZONING USE QUESTIONNAIRE
(FOR BUSINESS LICENSE APPLICATIONS)**

Consideration of your request for a City of Eloy business license requires the following information for the Planning and Zoning Division in order to determine the legality of your proposed use of property:

Business Type: _____

Please explain in detail what type of work will be done: _____

Will your business occupy a permanent structure in the City of Eloy? _____ Yes _____ No

If no, please explain the location of the property that will be used for the business:

Is the structure a residence or a commercial or industrial building? _____

Do you own your business premises? _____ Yes _____ No

If no, provide property owner's name, address and phone number and attach a **notarized** written consent form or a lease agreement (**City Limits Only**):

Check one:	New Business	New Owner - Existing Business
	Existing Business - New Location	Existing Business - New to Eloy
	Existing Business - Lapsed License	Existing Business – Address Change
	Existing Business – Additional Business Activity	

The issuance of a business license does not grant any rights to violate any provision of the zoning ordinance. There are very specific limitations on the use of a residence for business activity. Similarly, possession of a business license for a "Mobile" business does not confer the right to set on public or private property without the **written** consent of the owner **in possession**. Construction services offered to the public also require a contractor's license.

**CITY OF ELOY
BUSINESS LICENSE INFORMATION**

Name of Business Owner/Operator: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

Social Security#: _____ Date of Birth: _____

Driver's License #: _____ State of Issuance: _____

Height: _____ Weight: _____ Hair: _____ Eyes: _____

EMERGENCY CONTACT DURING NON-BUSINESS HOURS:

Name: _____ Telephone #: _____

Address: _____

***APPLICANT(S) IS (ARE) SUBJECT TO A CRIMINAL HISTORY
BACKGROUND CHECK***



**CITY OF ELOY POLICE
DEPARTMENT**

EMERGENCY RESPONSE LIST

BUSINESS NAME: _____

ADDRESS: _____

BUSINESS TELEPHONE NUMBER: _____

OWNER: _____

HOME ADDRESS: _____

PERSONS TO CALL IN ORDER OF PREFERENCE

1. NAME: _____ PHONE: _____

2. NAME: _____ PHONE: _____

3. NAME: _____ PHONE: _____

4. NAME: _____ PHONE: _____

5. NAME: _____ PHONE: _____

BUILDING TYPE: (Masonry), (Frame), (Other) ? _____

ALARM SYSTEM: Yes _____ No _____ Type? _____

HAZARD MATERIAL: Yes _____ No _____

OPERATING HOURS: _____ - _____

OPERATING DAYS: _____ - _____



City of Eloy
Finance Department
628 North Main Street
Eloy, Arizona, 85131

Licensing Eligibility Requirement Form (ARS § 41-1080)

Effective October 1, 2008, a new law went into effect preventing the City from issuing a license (either new or renewed) to an individual unless the individual has provided the City of Eloy with one of the forms of identification listed below. **If your business is incorporated, provide a certificate of good standing.**

To become or remain eligible for a license, complete this form and present one of the forms of identification as listed below to the City of Eloy's Finance Department for processing. **Please indicate which form is presented and Provide copy.**

	An Arizona driver license issued after 1996 or an Arizona non-operating identification
	A driver license issued by a state that verifies lawful presence in the United States. (Licenses from HI, IL, ME, MD, NM, TX, UT and WA are not acceptable.)
	A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
	A United States certificate of birth abroad.
	A United States passport.
	A foreign passport with a United States visa.
	An I-94 form with a photograph.
	An United States citizenship and immigration services employment authorization document or refugee travel document.
	A United States certificate of naturalization.
	A United States certificate of citizenship.
	A tribal certificate of Indian blood.
	A tribal or Bureau of Indian Affairs affidavit of birth.
	Corporate certificate of good standing

By my signature below, I hereby certify, under penalty of perjury, that I am legally authorized to be present in the United States.

Full Signature of Licensee

Date