

## TOWN OF CLIFTON

## **Business License Application and Agreement**

Questions Regarding this form? Contact Town Hall at 928-865-4146

	Application Information				
Date:					
Application Type: (Circle Appropriate)		New Up	date/Change	Renewal	
If Update/Change					
Please Describe:					
License Type:	Standard	Professional	Annual	Monthly	
	Annual \$20	Annual \$40	Peddlers	Peddlers	
(See Fee Schedule if needed)	(Ex: Business, Trade, Occupation)	(Ex: Doctor, Lawyer, CPA)	\$100 (Must Qualify)	\$10 per Month	
				# of Months:	

	Business Owner Information
Applicant/Owner	
Full Name:	
Applicant/Owner	Applicant/Owner
Phone Number:	Email Address:
Applicant/Owner	
Mailing Address:	
Do you own the property	
on which the business	
will be conducted?	
If No, Property	
Owner (Name,	
Phone, Complete	
Address)	

Business Emergency Contact Information				

	Business Information					
Name of Business:						
Date Business						
Began:						
Physical Property Address:						
Business						
Phone Number:						
*Arizona Transaction			Feder	al Tax ID #		
Privilege Tax			(Federal EIN			
Identification No.			Number if applicable or			
			owner's SSN)			
# of Employees			Are you engaged in more than one			
			business at this			
	location?		cation?			
Character of Business(es)						
(If a Hotel/B&B/Boarding House Please indicate # of rooms and/or apartments)						
Other Agency	Greenlee	Contra	ctor's	Arizona	a	Other (Please List)
Permit/Licenses	County	County Licens		ise Liquor Lice		
(Circle applicable and include	Health					
copies)	Permit					
Town of Clifton	Last Issue	ast Issue Date of Las		t Date of		Sewer Service
Compliance/Requirements:	Certificate of		Fire Inspection		Acct. Number for Business	
	Occupancy					

<sup>\*</sup>This information is required prior to the issuance of the Business License. Applications may be obtained from the Arizona Dept of Revenue.

## **For Your Reference**

It is the responsibility of the business owner to notify the Clerk's Office regarding any change of business information found on the application form. Please report any changes or closure of your business to the information below.

- · For building permits, certificate of occupancy, or to schedule a fire inspection please contact the Code Enforcement Department at 928-865-4146.
- · For sewer connection or utility billing questions, please contact Town Hall at 928-865-4146.
- · For a complete copy of the Town of Clifton Code pertaining to Business Licensing including fee schedule, visit our website <a href="https://www.cliftonaz.com">www.cliftonaz.com</a>, or contact Town Hall.
- · Renewal Notices will be sent to the mailing address provided. Please notify the Clerk's Office if your mailing address has changed to help avoid any late penalties during renewal time.

	<b>Business License Checklist</b>						
☐ <b>TAX ID NUMBER</b> - Obtain your Transaction	on Privilege Tax Number (TPT#) through the State of Ariz	zona. This number is required if					
our business is selling products or offering taxable services. A separate TPT# is issued for each business owned and operated. Contact the Arizona Department of Revenue to see if your business is in compliance. Apply at www.aztaxes.gov; by calling (602)							
	less location will be reviewed for zoning compliance by	a town official and approved or					
denied on the application.							
	Certificate of Occupancy and/or Building Permit (for new	construction/remodeling), Fire					
inspection, and any other required permits							
	N - Completely fill out the business license application for						
	th payment and copies of additional permits/licenses if	аррисавіе.					
Mailing Address: PO Box 1415	Physical Address: 510 N. Coronado Blvd						
Clifton, AZ 85533	Clifton, AZ 85533						
□ FEE – Applicable Fee	Cirtori, AZ 85555						
	compliance checks have been made by city officials, a lic	ense will be mailed to the					
	Applicant may request to pick up the license once appr						
may refuse to renew a license, after no false statement contained in the applic the Town Tax Code adopted by Title III affecting the public peace, health or saf	this article may be suspended or revoked by the T tice of hearing, for any of the following reasons: If ation for license; Any violation of Title XI Chapter 1 Chapter 36 or any other statute, ordinance regulat fety of the citizens of the Town of Clifton. Conduct pation in violation of Arizona Revised Statutes.	raud, Misrepresentation of .10 of the Clifton Town Code or .ion or other requirement					
APPLICANT'S SIGNATURE		DATE					
APPLICANT 3 SIGNATURE		DATE					
************	**************	*****					
For Office Use Only:							
Is the husiness location/operation in	an approved Town Zoning area? Y/N						
	an approved 10mil Zonnig area: 1711						
If yes: Zone ID							

Does the business require additional information from other agencies/departments: Y / N

If yes: List agencies/departments