



SAMPLE - John Doe - AZ LLC

# Gila River Indian Community Business License Application



\*PLEASE PRINT\*

## I. Type of Application

## Type of License

- ☒ New  
☐ Change  
☐ Renewal, License # \_\_\_\_\_  
☐ Update, License # \_\_\_\_\_

- ☐ Annual License – Non-Member (\$150.00 fee)  
☐ Annual License – GRIC Enrolled Member (\$5.00 fee)  
 GRIC Member Number \_\_\_\_\_  
☒ Special Event – (\$50.00 fee)

Dates of Special Event  
9/19/25 To 9/21/25

## II. Type of Ownership

- ☐ Individual  
☐ Partnership - ☐ General ☐ Limited  
☐ Limited Liability Partnership  
☒ Limited Liability Company

State of Registration AZ Date \_\_\_\_\_

- ☐ Association  
☐ Not for Profit Organization  
 Attach IRS Letter of Determination  
☐ Corporation ☐ C Corp ☐ Sub S  
 State of Incorporation \_\_\_\_\_ Date \_\_\_\_\_

## III. Business Information

- 1) Legal Business Name Cool Horror Shop, LLC  
 2) Employer ID Number (EIN) or SSN (Individual) 12-345678  
 3) Business Name or DBA Name \_\_\_\_\_  
 4) Contact Name John Doe  
 5) Email Address coolhorrorshop@gmail.com  
 6) Business Address \_\_\_\_\_  
 7) Mailing Address (if different than Business Address)  
1234 Main St.  
Mesa, AZ 12345  
 8) In Care of or Attn: John Doe  
 9) Business Phone Number 480-555-5555  
 10) Is your Business Located on the Gila River Indian Community (GRIC)? ☒ Yes ☐ No  
 11) Detailed description of business activity (describe business activity: principal product manufactured, commodity sold, or services performed)  
Horror themed clothing, tumblers, stickers & collectables  
 12) Location of business activity and/or Event Name occurring on GRIC  
3rd Annual Gathering of the Ghouls, Rawhide Event Center  
 13) Date business started on GRIC 9/20/25  
 14) Date Sales Began on GRIC \_\_\_\_\_  
 15) Estimated Gross Sales \_\_\_\_\_  
 16) Filing Method ☐ Cash ☐ Accrual  
 17) Do you have a previous GRIC Business License? ☐ Yes ☒ No if yes, license # \_\_\_\_\_

## IV. Identification of Owner (and spouse if married) Partners, Corporate Officers, Members and/or Managing Members or Officials (if more space needed attach a separate sheet)

Name (Last, First, M.I.)	SSN	Title	% owned	Residential Address	Phone Number
<u>Doe, John J.</u>	_____	<u>Owner</u>	<u>100%</u>	_____	_____

**V. Individuals Authorized to Receive Business License Information not Listed Above.**

Name (Last, First, M.I.)

Title (if applicable)

**VI. Location of Tax Records (by whom and where your records are kept)**

Name of Company

Person to Contact

Address (City, State and Zip Code)

Phone Number

**VII. Business Purchase information**

Did you buy an existing business? ☐ Yes ☐ No

If yes, did that business conduct business on the Gila River Indian Community? ☐ Yes ☐ No

Did the business have a license issued by the Gila River Indian Community? ☐ Yes ☐ No

Previous Business Name

Previous Owner's Name

Previous Business Owner's Address

Previous Owner's Phone Number

GRIC Business License Number

**VIII. Consent to Liability (initials required)**

You will receive a copy of Title 13 of the GRIC Code with your license. This is an acknowledgement that you are responsible for reading Title 13, and consent to the liability for and payment of all taxes imposed by it, and as it may be amended by the GRIC Community Council in the future.

**IX. Signature(s) by Individuals Legally Responsible for the Business**

This application must be signed by a sole owner, two partners, two corporation officers, members and/or managing members, the trustee, receiver or personal representative of an estate.

Under penalty of perjury, I(we) declare that the information on this document is true and correct. I understand that giving false information could result in disapproval and/or revocation of my business license.

Type or Print Name

John Doe

Title

Owner

Signature

John Doe

Date

3/15/25