



**Town of Parker**  
 1314 - 11<sup>th</sup> Street Parker, AZ 85344  
 Phone: (928)669-9265 Fax: (928)669-5247

License Needed:

<input type="checkbox"/> Temporary Dates: _____
<input type="checkbox"/> Local Annual
<input type="checkbox"/> Non-Local Annual

### Business License Application

Please Note: This is only an application, NOT a permit to conduct business. This completed application must be filed and approved before you can lawfully engage in business within the Town of Parker. A separate license is required for each business and/or business location. Licenses are non-transferable and, once issued, shall be valid until revoked by the Town of Parker; subject to payment of annual fees, etc. The information provided herein is a public record that may be disclosed by the Town of Parker.

**Business Information:**

Business Name:	
Business Site Address:	
Business Mailing Address:	
Address Where Financial Records Are Kept:	
Business Phone:	Date Business Opened:
Federal Tax ID or SSN:	AZ State Sales Tax #:
AZ State License #:	Liquor License #:

**Type of Ownership:**     Sole         Partnership         Limited Partnership         Corporation  
     Limited Liability Corporation         Non-Profit

**Type of Business:**     Wholesale         Retail         Service

Describe: \_\_\_\_\_  
 \_\_\_\_\_

**Owner Information:**

Owner Name:	Phone:
Owner Mailing Address:	
Partner/Manager Name:	Phone:
Partner/Manager Mailing Address:	

**If you've recently purchased this business, give previous owner name:** \_\_\_\_\_

## Licensing Eligibility Requirement ARS41-1080

On May 1, 2008, Governor Napolitano signed Laws 2008, Ch. 152 (House Bill 2745) into law. The new law contains a "licensing eligibility" section (Arizona Revised Statutes 41-1080) preventing any licensing agency in the state of Arizona from issuing a new license to an individual unless the individual has provided the agency with one of the forms of identification listed in the law.

To become eligible for a license, complete this form, staple a photocopy showing both sides of your identification to the back and return to the address above.

Provide only **ONE** of the following forms of Identification:

- An Arizona driver's license issued after 1996 or an Arizona non-operating identification license.
- A driver's license issued by a state that verifies lawful presence in the United States. (Licenses from HI, IL, ME, MD, NX, TX, UT, and WA are not acceptable.)
- A birth certificate or delayed birth certificate issued in any state, territory or possession of the U.S.
- 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.
- A 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.

**Return original of this completed form with a copy of your identification to the address listed at the top of page 1 of this document.**

By my signature below, I hereby certify, under penalty of perjury, that the copy of the document I am providing is a true and accurate copy of the original document and that I am legally authorized to be present in the United States.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>*OFFICIAL USE ONLY*</b>	
<b>Approved:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>By:</b> _____	<b>Date:</b> _____
<b>Zoning Compliance:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b> _____	
<b>Fire Inspection:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b> _____	