

New Business License – Fee - \$50.00 – License # _____

Special Event Vendor Application – Fee - \$25.00 – License # _____

Event Name:



Town of Camp Verde
 473 S Main Street, Suite 102
 Camp Verde, AZ 86322
 Clerk's Office 928-554-0000
www.campverde.az.gov

**BUSINESS LICENSE/SPECIAL EVENT LICENSE AND/OR
 HOME OCCUPATION APPLICATION**
INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

BUSINESS/VENDOR INFORMATION		TYPE OF OWNERSHIP	TYPE OF SERVICE
Company name		<input type="checkbox"/> Sole proprietorship	<input type="checkbox"/> Retail
Phone Number		<input type="checkbox"/> Partnership	<input type="checkbox"/> Service
E-mail address:		<input type="checkbox"/> Corporation	<input type="checkbox"/> Food
Would you like your renewal notice e-mailed to you <input type="checkbox"/> yes <input type="checkbox"/> no		<input type="checkbox"/> Other	<input type="checkbox"/> Non Profit/Civic Organization (No Fee)
Mailing Address			
City, State ZIP Code			
Address of Business	City, State ZIP Code		
Description of Business/Promotional Item/Hours of Operation			
Emergency Contact Name		Emergency Contact Phone #	
State Tax #			
Contractor License #		Square footage of Building if located in CV:	
# of Signs if in CV		Number of Parking Spaces	
# of Employees		Driver's License Number	
Is this Rental Property <input type="checkbox"/> yes <input type="checkbox"/> no	If Yes Who is Owner of Property where Business is located:		
<p>Issuance of a business license does not constitute a waiver of any existing Zoning Ordinance, other laws, or any deed restrictions (PER TOWN CODE, CHAPTER 9 ARTICLE 9-3-2). BEFORE A LICENSE IS ISSUED, IT WILL BE REVIEWED BY COMMUNITY DEVELOPMENT DEPARTMENT.</p> <p>All Vendors shall obtain any necessary health or regulatory permits required by law and obtain the written permission of the property owner for the operation prior to setting up a display.</p> <p>I hereby certify that the statements made herein have been examined by me and are to the best of my belief and knowledge, true and complete. I further certify that I understand that a "Use Permit" or a "Change of Use Permit" may be required prior to the issuance of a Business License.</p>			
COMPLETE THIS SECTION ONLY IF YOU HAVE A HOME OCCUPATION BUSINESS			
<p>I hereby declare that, in the conduct of my home occupation at the above address, I will comply with the requirements pertaining to such occupations as set forth in the Town of Camp Verde Planning & Zoning Ordinance Part 3 Section 303 "Home Occupations". A home occupation shall be deemed an accessory use to a residential dwelling and shall be subject to the following standards:</p> <p>Please mark (X) each statement that applies to your home occupation business:</p> <p><input type="checkbox"/> The occupation is clearly incidental and secondary to the principal use of the residence; <input type="checkbox"/> Not more than one outside employee (not residing on the premises).</p> <p><input type="checkbox"/> The occupation is not disruptive of the residential character of the neighborhood; <input type="checkbox"/> The occupation shall not create a traffic or parking problem;</p> <p><input type="checkbox"/> The occupation shall not create any disturbing or offensive activity, noise, vibration, smoke, dust, odor, heat, glare, or other unhealthy or unsightly condition;</p> <p><input type="checkbox"/> Signage shall be limited to identification as specified in the Planning & Zoning Ordinance Section 404 F, identification signs.</p> <p><input type="checkbox"/> Floor area for the Home Occupation is limited to 25% of the total floor areas of the structure(s) on the premises in which the home occupation is conducted.</p> <p>By signing below I declare that I have read, understand and agree to abide by the standards set forth in Part 3 Section 303 "Home Occupations" as stated above:</p> <p>I hereby certify that the statements made herein have been examined by me and are to the best of my belief and knowledge, true and complete. I further certify that I understand that a "Use Permit" or a "Change of Use Permit" may be required prior to the issuance of a Business License. TIME FRAME as required by ARS 9-835 - All Applications will be processed within 10 Business Days unless additional inspections are required by the Building Official. If a Use permit or Change of Use Permit is required, the application will be processed within 10 Business Days after Use Permit is approved and fees paid. A License WILL NOT be issued without the Building Officials Approval.</p>			
SIGNATURES FOR BUSINESS LICENSE/SPECIAL EVENT AND HOME OCCUPATION			
Signature		Signature	
Title and Date		Title and Date	

***Note: Business license numbers must be included on all correspondence, invoices and Certificates of Insurance's.**

TIME FRAME as required by ARS 9-835 - All Applications will be processed within 10 Business Days unless additional inspections are required by the Building Official. If a Use permit or Change of Use Permit is required, the application will be processed within 10 Business Days after Use Permit is approved and fees paid. A License WILL NOT be issued without the Building Officials Approval.

FOR OFFICE USE ONLY	
Date sent to Community Development _____	Planning & Zoning Review: _____
Parcel # _____	Building Review: _____
Zoning _____	Code Enforcement Review: _____
	Marshal's Office Notified: _____
	Town Clerk: _____
	Date _____

Business License Fees:

New or Change in Ownership or Location	
New Business License Fee/Inspection/Setup Fee	\$50.00
Peddler/Solicitor's License (in addition to \$1,000 Bond & Cost of Background Check)	\$25.00 Per day
Special Event Promoter (Per Event)	No Charge
Special Event Vendor (Non-Profits)	No Charge
Special Event Vendor	\$25.00 Per Event
Renewal	
Business License Fee (annual)	\$25.00
Name Change in Addition to Annual Fee	No Charge
Liquor License Permits	
Application/Posting/Inspection Fee	\$250.00
Business License (annually) + the following:	
Series 01 through 14 and Series 16 & 17	\$50.00
Series 15 Special Event (Temporary License - Annually)	\$100.00
One-time Special Event Permit	\$50.00

I hereby acknowledge the above restrictions and conditions on this permit.

Signature: _____ Date _____ .