

LICENSE # \_\_\_\_\_

TOWN OF CAMP VERDE  
473 S MAIN STREET, SUITE 102  
CAMP VERDE, AZ 86322  
928-567-6631

APPLICATION DATE: \_\_\_\_\_

[www.campverde.az.gov](http://www.campverde.az.gov)  
Arizona Tax Forms: [www.aztaxes.gov](http://www.aztaxes.gov)

New Business License Fee: \$50.00  
Liquor License Annual Fee \$50.00

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

Name of Business or Corporation: \_\_\_\_\_

Location of Business: \_\_\_\_\_ Unit/Suite # \_\_\_\_\_ State: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone No. \_\_\_\_\_

Description of Business/Type of Operations/Hours of Operation: \_\_\_\_\_

State Tax # (TPT) \_\_\_\_\_ Contractor License # \_\_\_\_\_ Assessor's Parcel # \_\_\_\_\_ Liquor License # \_\_\_\_\_

Total Number Employed \_\_\_\_\_ Number of Signs \_\_\_\_\_ Square Footage of Building \_\_\_\_\_ Number of Parking Spaces \_\_\_\_\_

Is this Rental Property:  Yes  No Type of Ownership:  Partnership  Corporation/LLC  Individual

Business Owner/Contact Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone No. \_\_\_\_\_

Property Owner: (Print Clearly) \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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 THE FIRE DISTRICT AND COMMUNITY DEVELOPMENT DEPARTMENT.

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.

***To be completed for Home Occupation Business only***

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:

Please mark (X) each statement after reading:

- \_\_\_ The occupation is clearly incidental and secondary to the principal use of the residence;
- \_\_\_ Not more than one outside employee (not residing on the premises).
- \_\_\_ The occupation is not disruptive of the residential character of the neighborhood;
- \_\_\_ The occupation shall not create any disturbing or offensive activity, noise, vibration, smoke, dust, odor, heat, glare, or other unhealthy or unsightly condition;
- \_\_\_ The occupation shall not create a traffic or parking problem;
- \_\_\_ Signage shall be limited to identification as specified in the Planning & Zoning Ordinance Section 404 F, identification signs.
- \_\_\_ 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.

**All Home Occupations are required to have a Transaction Privilege Tax Number from the State of Arizona**

By signing here 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:

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.

**Providing work, materials, and/or services to the Town.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

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

**FOR OFFICE USE ONLY**

Date \_\_\_\_\_

Planning & Zoning Review: \_\_\_\_\_

Building Review: \_\_\_\_\_

Code Enforcement Review: \_\_\_\_\_

Fire Department Review: \_\_\_\_\_

Marshal's Office Notified: \_\_\_\_\_

SIC CODE \_\_\_\_\_ NAICS CODE \_\_\_\_\_

Town Clerk: \_\_\_\_\_

Date

**Business License Fees:**

<b>New or Change in Ownership or Location</b>	
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
<b>Special Event Vendor (Non-Profits)</b>	No Charge
Special Event Vendor	\$25.00 Per Event
<b>Renewal</b>	
Business License Fee (annual)	\$15.00
Name Change in Addition to Annual Fee	\$10.00
<b>Liquor License Permits</b>	
Application/Posting/Inspection Fee	\$250.00
<b>Business License (annually) + the following:</b>	
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