



Transaction Privilege (Sales) Tax & Occupational Business License Application Information (Out-of-City Businesses)

GENERAL APPLICATION INFORMATION

Reference Documents

- Arizona Revised Statutes, Title 9, Cities and Towns, Chapter 7, Article 4
- City of Flagstaff City Code, Title 3 - Business Regulations

Important Facts

- The application review process will be suspended due to incomplete applications.
- Any documents in this packet may be found on the City website at www.flagstaff.az.gov.
- Applicants may receive a clarification from the City of Flagstaff of any interpretation or application of a statute, ordinance, code, or authorized substantive policy statement affecting the procurement of a license by providing the municipality a written request.

City of Flagstaff Contact

- For questions on this application, please contact:

Sue Miller
Administrative Specialist

Phone: 928-213-2250
Email: smiller@flagstaffaz.gov

Application Requirements/Checklist

****All of the following documents are required****

**** All information must be completed before any review will take place****

- \$46 Transaction Privilege Tax License Fee paid to City of Flagstaff. (Non-refundable).
- \$20 Occupational Business License Fee paid to City of Flagstaff. (Non-refundable).
- Transaction Privilege (Sales) Tax/Occupational Business License application
- Licensing Eligibility Form

****If you are unsure which license is applicable for your business, please contact the City at 928-213-2250 for more information.****

Review Timeframes

Administrative Review- 15 Business Days
Substantive Review- 20 Business Days

Total review: 35 Business Days

****Please Note: Timeframes may be less if all information is provided in a timely manner****

APPLICATION REVIEW INFORMATION



Transaction Privilege (Sales) Tax & Occupational Business License Application Information (Out-of-City Businesses)

PHASE 1- ADMINISTRATIVE REVIEW

Timeframe: 15 Business Days

Notification of incomplete application information will suspend the overall review timeframe.

1. City of Flagstaff (Initial Review)
 - a. A complete application will proceed to Phase 3-Substantive Review.
 - b. An incomplete application will be sent a comprehensive written notice of all incomplete application items.
2. Taxpayer (Follow-up)- 20 business days
 - a. If no information is returned to the City within 20 business days, the City will consider the application withdrawn and all fees will be forfeited.
 - b. If information is returned within 20 business days, the City will continue the review of the application.
3. The review and notification process will continue for two reviews. After the second request for more information, the City of Flagstaff will not send a third request and the application will be withdrawn and all fees forfeited.

PHASE 2- SUBSTANTIVE REVIEW

Timeframe: 20 Business Days

Notification of incomplete application information will suspend the overall review timeframe.

1. Substantive Review- City of Flagstaff (Initial Review)- 20 Business Days from the date of the completed application as noted in Phase 1- Administrative Review.
 - a. If no other information is required, the City will issue the license within 20 business days.
 - b. If more information is required, a comprehensive written notice of all items that require further explanation will be sent. Upon mailing of the notice, the review timeline will be suspended until all requested information is provided.
2. Taxpayer (Follow-up)- 20 business days
 - a. If no information is returned to the City within 20 business days, the City will consider the application withdrawn and all fees forfeited.
 - b. If information is returned within 20 business days, the City will continue the review of the application.
 - c. If no information or incomplete information is returned to the City within 20 business days, the City will deny the application and all fees will be forfeited.

PHASE 3- LICENSE ISSUANCE OR DENIAL

1. If all requirements are met, the license will be issued and mailed.
2. If all requirements are not met, a license denial letter will be mailed to the applicant with detailed information of the appeals process and contact person(s).



City of Flagstaff

Privilege (Sales) Tax and Occupational Business License Application

Sales Tax Division
 211 W. Aspen Ave
 Flagstaff, AZ 86001-5359
 Phone: 928-213-2250
 Fax: 928-213-2209

Check any that apply:	<input type="checkbox"/> New Business	Former Owner (if applicable)	Start Date (In Flagstaff)	For Office Use Only
	<input type="checkbox"/> New Owner of Existing Business	Current City License #	Date of Chan* ^	License Type
	<input type="checkbox"/> Name Change Only <input type="checkbox"/> Location Change			TPT BL
SECTION I. BUSINESS INFORMATION				License Fee Total
Business Name (Legal Name)		Doing Business as Name (DBA Name)		
Street #	Direction	Street Name	Suite/Apt. #	
City	State	ZIP+ 4	Business Phone #	Tax Types
E-mail Address	State ID#	Contractors #	Federal ID#	09- Publishing 10- Job Printing 11- Rest./Bars 12- Amusements 13- Comm. Rent. 14- TPP 15- Contracting 17- Retail 18- Advertising 25- Hotel/Motel 35- BBB Other
SECTION II. MAILING ADDRESS & PHONE NUMBER				
Enter Name if Different from Section I (above) or Enter Care-of Name				
Street #	Direction	Street Name	Suite/Apt. #	
City	State	ZIP+ 4	Business Phone #	Other Info
SECTION III. BUSINESS OWNERSHIP & RECORD LOCATION				
Ownership Type:	Individual LLC Corp. - State of Inc. _____ Ltd. Partnership Gen. Partnership Other: _____			
	If LLC- IRS filing designation: Sole Proprietor Corporation Partnership			
Owners, Partners, 1) Officers, Individuals, or LLC Members (For Additional Names, Please Attach List)	Name		Social Security #	
	Home Address		Title	
	City	State	ZIP+ 4	Phone #
	2) Name		Social Security #	
	Home Address		Title	
	City	State	ZIP+ 4	Phone #
Corporate or LLC Statutory Agent	Name		Phone #	
Location Where Business Records Are Kept	Name		Phone #	Initials
	Address		City	State
		ZIP+ 4		
SECTION IV. BUSINESS TYPE				
Retail Sales	Construction Contracting	Hotel/Motel	Restaurant/Bar	Commercial Rental
Manufacturer	Personal Property Rental	Wholesaler	Advertising	Telecommunications
				Amusements Other _____
Describe Nature of Business				
Check method you will use in submitting reports:	Cash Receipts	Accrual	Does this location sell secondhand items?	Yes No
SECTION V. BUSINESS PREMISES STATUS				
Check One: In City Out of City	Do you own your business location? Yes No		If yes, is this your residence? Yes No	
	If no, complete Landlord/Property information		Square Footage of Premise:	
	Landlord/Property Manager Name		Address	Phone #
Do you rent a portion of the business premises to another entity? Yes No				

I certify that the statements made in this application are true and complete to the best of my knowledge. I have read and complied with all statutes, ordinances, and other requirements affecting public peace, health, and safety. I request that all pertinent City personnel access my property at any time deemed necessary to inspect work being done relating to this license. I accept the license authorized and issued in response to this application with the condition that I report timely and pay any and all taxes due by me to the City of Flagstaff. I understand that license and application fees are non-refundable and that incomplete forms may delay processing.

Print Name	Signature	Title	Date
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City Of Flagstaff

Licensing Eligibility Form

Before issuing a license to an individual, the individual must present one of the following documents to the municipality indicating that the individual's presence in the United States is authorized under federal law:

Check the box next to the document indicating lawful presence.

<input type="checkbox"/>	An Arizona driver license issued after 1996, or an Arizona non-operating identification license.
<input type="checkbox"/>	A driver license issued by a state that verifies lawful presence in the United States. (See overview of States' Driver's License Requirements)
<input type="checkbox"/>	A birth certificate or delayed birth certificate issued in any state, territory, or possession of the United States.
<input type="checkbox"/>	A United States certificate of birth abroad.
<input type="checkbox"/>	A United States passport.
<input type="checkbox"/>	A foreign passport with a United States visa.
<input type="checkbox"/>	An I-94 form with a photograph.
<input type="checkbox"/>	A United States citizenship and immigration services employment authorization document or refugee travel document.
<input type="checkbox"/>	A United States certificate of naturalization.
<input type="checkbox"/>	A United States certificate of citizenship.
<input type="checkbox"/>	A tribal certificate of Indian blood.
<input type="checkbox"/>	A tribal or bureau of Indian affairs affidavit of birth.

This provision does not apply to an individual, if **all** of the following apply:

1. The individual is a citizen of a foreign country, or, if at the time of application, the individual resides in a foreign country.
2. The benefits that are related to the license do not require the individual to be present in the United States in order to receive those benefits.

Signature of Applicant

Date

Signature of Municipal Employee

Date