



City of Apache Junction

300 East Superstition Blvd, Building C • Apache Junction, AZ 85119 • (480) 474-5050
www.apachejunctionaz.gov - businesslicense@apachejunctionaz.gov



BUSINESS LICENSE APPLICATION \$50.00 license fee

This application must be approved & a license must be issued before you may lawfully engage in business in the City of Apache Junction.

A separate license is necessary for each business location and each type of business.

There is no city application or fee for single family residential rentals.

Complete this application and return with the \$50.00 fee per business activity to the City Clerk's Office for review and approval of a business license.

TYPE & TERM OF LICENSE

Type: 1. Business / Nonprofit

2. New business to AJ / New owner of existing business / Name Change / Location change

Term: 12 months

BUSINESS INFORMATION

Legal Business Name: _____

Doing Business As (DBA): _____

Business Physical Address: _____

Business Phone Number: _____

Applicant E-mail Address: _____

Federal Tax ID #: _____ AZ Sales Tax #: _____

Start Date of Business in Apache Junction: _____

Business Mailing Address: _____

PRIMARY CONTACT INFORMATION

Primary Contact Name: _____ Title: _____

Primary Contact Phone Number: _____



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BUSINESS OWNERSHIP

Type of Ownership: check one

Corporation - Govt - LLC - LP - Nonprofit - Partnership - Individual/Sole Proprietorship - Trust

Legal Owner Name: _____ Title: _____

Legal Owner Phone Number: _____

Legal Owner Address: _____

Legal Owner Social Security #: _____ Percent Owned: _____

*for additional names, please attach a list

Location/Address of Tax Records: _____

BUSINESS TYPE

Describe Nature of Business: _____

AZ Contractors / ROC License#: _____ NAICS Code: _____

Do you sell, store or handle any hazardous materials? Yes / No
If yes, attach itemized list showing quantity & MSDS sheets for each.

BUSINESS PREMISE STATUS

Do you own your business location? Yes / No Is this your residence? Yes / No

Approximate square footage of business: _____

Landlord or Property Manager Name: _____

Landlord Address: _____

Landlord Phone #: _____

Do you rent a portion of the premises to another entity? Yes / No



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ONLY FOR BUSINESSES LOCATED WITHIN THE CITY OF APACHE JUNCTION

Are you a home based business? Yes / No

If yes, please also complete a Home Based Business Form. Development Services must review and approve applications for home based businesses.

Zoning District: _____ Parcel #: _____

Days of Operation: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Hours of Operation: _____ - _____

Will there will be outside storage? Yes / No

If yes, describe where it will be on the property and what will be stored in it: _____

Describe any planned signage including dimensions and location. Refer to City Code, Volume II Chapter 1 Zoning for regulations as some signs require a permit. _____

Will there be alcohol sales or distributions? Yes / No

Will there be any detectable odors generated by the business? Yes / No

If yes, please describe: _____

Provide information on the frequency of deliveries: _____

Describe any outdoor business activities: _____

SIGNATURE & ACKNOWLEDGEMENT

I certify that the statements made in this application are true and complete to the best of my knowledge. I accept the license authorized and issued in response to this application with the condition that I will meet any and all legal requirements applicable to the operation of this business as found in federal, state and local laws and ordinances.

Print Name: _____ Title: _____ Date: _____

Signature: _____ Phone Number: _____

for city staff only:

paid \$_____ on _____ by cash credit card check (circle one)

accepted by: _____ date to zoning: _____

business license #: _____ batch #: _____