



LAKE HAVASU CITY POLICE DEPARTMENT

2360 McCulloch Boulevard North
Lake Havasu City, Arizona 86403
Phone: (928) 855-1171 Fax: (928) 680-5431

OFFICIAL USE ONLY
Business License No.

APPLICATION FOR PEDDLER, SOLICITOR, AND TRANSIENT MERCHANTS

Submit completed application, two (2) passport photos, and \$133 non-refundable fee* to Lake Havasu City Police Department. If paying by check, please make payable to Lake Havasu City.

PLEASE TYPE OR PRINT LEGIBLY IN INK

1.	Applicant's Name:		
Physical Characteristics	DOB:	Weight:	Eye Color:
	Sex:	Height:	Hair Color:
	Drivers License:	State:	
	SSN:	How long in AZ:	
	Permanent Residence:		
Photograph (2)	Post Office Address:		
	Phone Number:		
	Local City Address:		
	Previous Address:		
	Business Name or DBA:		Business Phone:
Business Owner/Principal:		Home Phone:	
Business Mailing Address:			
3. Date(s) doing business in Lake Havasu City:			
City Business Location(s):			
4. Indicate Nature of Business:			
Supplier of Source of Goods:			
Location of Goods (address):			
Method of Delivery:			
If products of farm or orchard, are they grown or produced by applicant? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Description of Vehicle	Make:	Model:	Year:
	Color:	License No:	State:

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5.	Have you ever been arrested, charged, or detained for any offense or alleged violation of any law or ordinance? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, designate Misdemeanor or Felony.			
	Date:	Charge:	City, State:	Convicted: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Misd. <input type="checkbox"/> or <input type="checkbox"/> Felony
				<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> or <input type="checkbox"/>
				<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> or <input type="checkbox"/>
				<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> or <input type="checkbox"/>
				<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> or <input type="checkbox"/>
**If you need space to list additional offenses or alleged violations, please attach a separate sheet.				
6.	Have you ever been denied a Peddlers, Solicitors, or Transient Merchants License? <input type="checkbox"/> YES <input type="checkbox"/> NO			
7.	Good Character and Business Responsibility: Applicant must supply evidence of good character and business responsibility either in the form of the names of at least two property owners of Mohave County, Arizona, who will certify as to the applicant's good character and business respectability, or, other available evidence that will enable an investigator to properly evaluate the applicant's character and business responsibility:			
	Business/Property Owner	Business Address	Contact Person/Phone	Date of Operation/Employment

OR

Other evidence:	
Any falsification, omission, misrepresentation, or deception in completing this form will result in the application being denied.	
I certify that the statements made in this application have been examined by me and are, to the best of my belief and knowledge, true, correct, and complete. <input type="checkbox"/> YES <input type="checkbox"/> NO	
By my signature below, I hereby agree to submit to a local background investigation and fingerprint identification, to include an FBI criminal history verification. The procedure to change, correct, or update an FBI criminal history is set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.	
Date:	Signature:

*Fee includes Application (\$19), Background Investigation (\$66), Fingerprinting (\$26), and AZDPS Fingerprint Processing (\$22)

Notice: Arizona Revised Statutes § 9-495 requires in any written communication between the City and a person, the City provide the name, telephone number, and email address of an employee to provide information if the communication: 1) Demands payment of a tax, fee, penalty, fine or assessment; 2) Denies an application for a permit or license that is issued by the City; or 3) Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the City. The employee shall reply within five (5) business days after City's receipt of a communication if authorized and able.