



\$10 Per Day

LAKE HAVASU CITY TEMPORARY SPECIAL EVENT BUSINESS LICENSE

EVENT NAME _____	DATE _____
BUSINESS NAME / DBA _____	TAX ID NUMBER _____
MAILING ADDRESS _____	
BUSINESS TELEPHONE _____ EMAIL ADDRESS _____	

TYPE OF OWNERSHIP (CHECK ONE):

Association
 Government
 Individual/Sole Proprietorship
 Limited Liability Company
 Limited Liability Partnership
 Non-Profit
 Partnership

Professional/Limited Liability
 Corporation:

_____ **NAME OF CORPORATION**
 _____ **STATE OF INCORPORATION**
 _____ **DATE OF INCORPORATION**

DESCRIBE BUSINESS IN DETAIL: _____

PRINCIPAL / OWNER NAME _____	Title _____	Phone _____	Date of Birth _____
Home Address _____	City / State _____ Zip _____	Driver's License # _____	State _____
PRINCIPAL / OWNER NAME _____	Title _____	Phone _____	Date of Birth _____
Home Address _____	City / State _____ Zip _____	Driver's License # _____	State _____

AZ RESALE TPT ID # _____ **MOHAVE COUNTY HEALTH #** _____

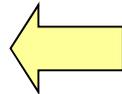
APPLICANT SIGNATURE _____ **DATE** _____

FOR ADMIN SVCS DEPT USE ONLY: **DATE PAID** _____ **LICENSE #** _____ **EXPIRES** _____

FIN-7 (8/13/15) **CITY CODE CHAPTER 5.04 BUSINESS LICENSE**



Lake Havasu City
Admin. Svcs. Dept., Business License
2330 McCulloch Blvd N
Lake Havasu City, AZ 86403
Ph: (928) 453-4146 Fax: (928) 855-5327



RETURN THE **ORIGINAL** OF THIS FORM
 WITH A **COPY** OF YOUR IDENTIFICATION
 TO THIS ADDRESS.

LICENSING ELIGIBILITY REQUIREMENT (ARS § 41-1080)

FULL Name:	LAST	FIRST	MIDDLE
Business Address (as shown on business license or application):			
City, State, and ZIP Code:			

On May 1, 2008, Governor Napolitano signed Laws 2008, Ch. 152 (House Bill 2745) into law. The new law contains a "licensing eligibility" section (Arizona Revised Statutes § 41-1080) preventing any licensing agency in the state of Arizona from issuing a (new or renewed) license to an individual unless the individual has provided the agency with one of the forms of identification listed in the law. View additional information about this requirement on the PRODUCERS page of the Department of Insurance Web Site (www.id.state.az.us).

To become or remain eligible for a license, complete this form, staple a photocopy showing both sides of your identification to the back and return to the address in our letterhead (top). Only provide **one** of the following forms of identification (mark an "X" next to the one you are submitting):

- 1. An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
- 2. A driver license issued by a state that verifies lawful presence in the United States.
- 3. A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
- 4. A United States certificate of birth abroad.
- 5. A United States passport.
- 6. A foreign passport with a United States visa.
- 7. An I-94 form with a photograph.
- 8. A United States citizenship and immigration services employment authorization document or refugee travel document.
- 9. A United States certificate of naturalization.
- 10. A United States certificate of citizenship.
- 11. A tribal certificate of Indian blood.
- 12. A tribal or bureau of Indian Affairs affidavit of birth.

By my signature below, I hereby certify, under penalty of perjury that the copy of the document I am providing is a true and accurate copy of the original document and that I am legally authorized to be present in the United States.

<hr/> FULL SIGNATURE OF LICENSEE	<hr/> DATE
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