



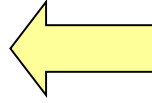
**LAKE HAVASU CITY**  
**TEMPORARY SPECIAL EVENT LICENSE**  
[www.lhcaz.gov](http://www.lhcaz.gov)

**\$12 Per Day**

EVENT NAME _____		EVENT DATE(S) _____	
BUSINESS NAME / DBA _____			
MAILING ADDRESS _____			
BUSINESS TELEPHONE _____		EMAIL ADDRESS _____	
AZ RESALE TPT ID # _____		FEDERAL TAX ID _____	
<b>TYPE OF OWNERSHIP (CHECK ONE):</b> <input type="checkbox"/> Association <input type="checkbox"/> Government <input type="checkbox"/> Individual/Sole Proprietorship <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Non-Profit <input type="checkbox"/> Partnership <input type="checkbox"/> Professional/Limited Liability <input type="checkbox"/> Corporation: _____			
		NAME OF CORPORATION	STATE OF INCORPORATION
DATE OF INCORPORATION _____			
DESCRIBE BUSINESS IN DETAIL: _____			
PRINCIPAL / OWNER NAME _____		Title _____	Phone _____
Home Address _____		City / State _____	Zip _____
		Driver's License # _____	State _____
PRINCIPAL / OWNER NAME _____		Title _____	Phone _____
Home Address _____		City / State _____	Zip _____
		Driver's License # _____	State _____
APPLICANT SIGNATURE _____		DATE _____	
FOR ADMIN SVCS DEPT USE ONLY: DATE PAID _____ LICENSE # _____ EXPIRES _____			
FIN-7 (1/18/22)		CITY CODE CHAPTER 5.04 BUSINESS LICENSE	



**Lake Havasu City**  
**Admin. Services, Business License**  
**2330 McCulloch Blvd N**  
**Lake Havasu City, AZ 86403**  
**Ph: (928) 453-4153 Fax: (928) 855-0551**



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

**LICENSING ELIGIBILITY REQUIREMENT (ARS § 41-1080)**

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

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](http://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.

\_\_\_\_\_

FULL SIGNATURE OF LICENSEE

\_\_\_\_\_

DATE