



BUSINESS LICENSE APPLICATION

FEE: \$50.00

Name of Business: _____ Phone: _____

Federal Tax # _____ State Tax # _____

Street Address of Business: _____
Mailing Address of Business: _____

Email Address: _____

Description of Business: _____

Tax Payer Identification # (TPT) _____

Owner of Business:

Name: _____

Address: _____

Work Phone: _____ Home Phone: _____

If Corporation:

Contact Person: _____

Address: _____ Phone: _____

Please Note: You can email this form to: admin@pimatown.az.gov

*****OFFICE USE ONLY*****

Fee Amount: _____ Cash or Check #: _____ Date Paid: _____