

New Business License – Fee - \$50.00 – License # \_\_\_\_\_

Special Event Vendor Application – Fee - \$25.00 – License # \_\_\_\_\_



TOWN OF CAMP VERDE  
BUSINESS LICENSE/SPECIAL EVENT LICENSE AND/OR  
HOME OCCUPATION APPLICATION

473 S Main Street, Suite 102  
Camp Verde, AZ 86322  
Clerk's Office 928-554-0023  
[www.campverde.az.gov](http://www.campverde.az.gov)

BUSINESS/VENDOR INFORMATION		TYPE OF OWNERSHIP	TYPE OF SERVICE
Business Name		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other	<input type="checkbox"/> Retail <input type="checkbox"/> Service <input type="checkbox"/> Food <input type="checkbox"/> Non Profit/Civic Organization (No Fee)
Owners Name			
Owners Phone number			
e-Mail Address :			
Mailing Address City, State ZIP Code:			
Location of Business: City, State ZIP Code:			
Description of Business Operation (be specific include what are you going to be doing? Are you Selling anything? Hours of operation):			
Emergency Contact Name:		Emergency Contact Phone #	
State Tax #	Contractor License #		
Square footage of building:	Number of signs:	Number of Parking Spaces:	
# of Employees:	Applicants Driver's License Number :		
Is location of business rented. <input type="checkbox"/> yes <input type="checkbox"/> no	If Yes Who is Owner of Property where Business is located:		
<p>Issuance of a business license does not constitute a waiver of any existing Zoning Ordinance, other laws, or any deed restrictions (PER TOWN CODE, CHAPTER 9 ARTICLE 9-3-2). BEFORE A LICENSE IS ISSUED, IT WILL BE REVIEWED BY COMMUNITY DEVELOPMENT DEPARTMENT.</p> <p>All Vendors shall obtain any necessary health or regulatory permits required by law and obtain the written permission of the property owner for the operation prior to setting up a display.</p> <p>I hereby certify that the statements made herein have been examined by me and are to the best of my belief and knowledge, true and complete. I further certify that I understand that a "Use Permit" or a "Change of Use Permit" may be required prior to the issuance of a Business License.</p>			
<b>COMPLETE THIS SECTION ONLY IF YOU HAVE A HOME OCCUPATION BUSINESS</b>			
<p>I hereby declare that, in the conduct of my home occupation at the above address, I will comply with the requirements pertaining to such occupations as set forth in the Town of Camp Verde Planning &amp; Zoning Ordinance Part 3 Section 303 "Home Occupations". A home occupation shall be deemed an accessory use to a residential dwelling and shall be subject to the following standards:</p> <p>Please mark (X) each statement that applies to your home occupation business:</p> <p><input type="checkbox"/> The occupation is clearly incidental and secondary to the principal use of the residence; <input type="checkbox"/> Not more than one outside employee (not residing on the premises).</p> <p><input type="checkbox"/> The occupation is not disruptive of the residential character of the neighborhood; <input type="checkbox"/> The occupation shall not create a traffic or parking problem;</p> <p><input type="checkbox"/> The occupation shall not create any disturbing or offensive activity, noise, vibration, smoke, dust, odor, heat, glare, or other unhealthy or unsightly condition;</p> <p><input type="checkbox"/> Signage shall be limited to identification as specified in the Planning &amp; Zoning Ordinance Section 404 F, identification signs.</p> <p><input type="checkbox"/> Floor area for the Home Occupation is limited to 25% of the total floor areas of the structure(s) on the premises in which the home occupation is conducted.</p> <p>By signing below I declare that I have read, understand and agree to abide by the standards set forth in Part 3 Section 303 "Home Occupations" as stated above:</p> <p>I hereby certify that the statements made herein have been examined by me and are to the best of my belief and knowledge, true and complete. I further certify that I understand that a "Use Permit" or a "Change of Use Permit" may be required prior to the issuance of a Business License. <b>TIME FRAME</b> as required by ARS 9-835 - All Applications will be processed within 10 Business Days unless additional inspections are required by the Building Official. If a Use permit or Change of Use Permit is required, the application will be processed within 10 Business Days after Use Permit is approved and fees paid. A License WILL NOT be issued without the Building Officials Approval.</p>			
<b>SIGNATURES FOR BUSINESS LICENSE/SPECIAL EVENT AND HOME OCCUPATION</b>			
Signature:		Title:	
Print Name			
Date:			

**\*Note: Business license numbers must be included on all correspondence, invoices and Certificates of Insurance's.**

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FOR OFFICE USE ONLY	
Date sent to Community Development _____	Planning & Zoning Review: _____
Parcel # _____	Building Review: _____
Zoning _____	Code Enforcement Review: _____
	Copper Canyon Fire: _____
	Town Clerk: _____
	Date _____

Business License Fees:

New or Change in Ownership or Location	
New Business License Fee/Inspection/Setup Fee	\$50.00
Peddler/Solicitor's License (in addition to \$1,000 Bond & Cost of Background Check)	\$25.00 Per day
Special Event Promoter (Per Event)	No Charge
<b>Special Event Vendor (Non-Profits)</b>	No Charge
Special Event Vendor	\$25.00 Per Event
<b>Renewal</b>	
Business License Fee (annual)	\$25.00
Name Change in Addition to Annual Fee	No Charge

I HEREBY ACKNOWLEDGE THE ABOVE RESTRICTIONS AND CONDITIONS ON THIS LICENSE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME: \_\_\_\_\_