

\$50.00
Expires June 30, 2011

**APPLICATION FOR
TOWN OF QUARTZSITE VENDOR LICENSE**

ANY PERSON OPERATING AS A VENDOR IN THE TOWN OF QUARTZSITE SHALL REGISTER WITH THE TOWN AND OBTAIN A VENDOR LICENSE. SAID LICENSE DOES NOT TAKE THE PLACE OF ANY PERMIT OR LICENSE REQUIRED BY THE STATE OF ARIZONA. THIS LICENSE IS NON-TRANSFERABLE FROM SELLER TO SELLER. LICENSE MUST BE POSTED & VISIBLE FROM A DISTANCE OF TWENTY (20) FEET.

DBA: _____

NAME: _____ PHONE: _____

PERMANENT ADDRESS: _____

DRIVERS LICENSE NO. & STATE: _____

DESCRIPTION OF BUSINESS/MERCHANDISE: _____

LA PAZ COUNTY HEALTH PERMIT #: _____ AZ RESALE TAX #: _____

BUSINESS LOCATION & SPACE #: _____

VALIDATED BY: _____ PAYMENT- CASH CHECK # _____

DATE: _____ APPLICANT SIGNATURE *: _____

REFUSAL TO COMPLY SHALL RESULT IN EITHER A CRIMINAL OR CIVIL CITATION FOR VIOLATION OF THIS CHAPTER. IF FOUND RESPONSIBLE, A PENALTY SHALL BE A FINE OF \$250.00 FOR THE FIRST OFFENSE. IF FOUND RESPONSIBLE FOR A SECOND OFFENSE A FINE OF AT LEAST \$250.00 & INELIGIBILITY TO OBTAIN A FUTURE VENDOR SALES PERMIT FOR FIVE (5) YEARS. EACH DAY A VIOLATION CONTINUES SHALL BE A SEPARATE OFFENSE PUNISHABLE AS HEREIN ABOVE DESCRIBED.

*I CERTIFY THE FACTS TO BE TRUE AND CORRECT IN ACCORDANCE WITH A.R.S. §13-2704(A)

THIS AREA IS FOR TOWN USE ONLY.

APPLICATION SENT OUT BY _____ DATE _____

APPLICATION RECORDED IN BY _____ DATE _____

**RETURN APPLICATION TO:
TOWN OF QUARTZSITE
PO BOX 2812
QUARTZSITE, AZ 85346-2812
ATTN: Reception**