

STATE OF ARIZONA DEPARTMENT OF HOUSING

P.O. BOX 6280 PHOENIX, ARIZONA 85005-6280 (602) 771-1000 FAX: (602) 771-1002

BUSINESS LICENSE RENEWAL FORM

NAME:				
				
			ZIP:	
	ER:			
RENEWED ONLY THE REQUIRED N	WHEN THIS FORM NONREFUNDABLE	M IS FULLY COMPLI FEE. MAKE CHEC	ETED AND RETURNED K PAYABLE TO THE AF	DRM. YOUR LICENSE WILL BE TO THIS DEPARTMENT WITH RIZONA DEPARTMENT OF P.O. BOX STATED ABOVE.
Your Annual Rer	newal Certificate E	EXPIRES on:		
The yearly renev	al fee for your lice	ense is:		
	e paid PRIOR to be allowed for a LA		or the fee will be 125%	of the regular annual fee. No
LATE RENEWA	L FEE for your lice	ense is:		
SINCE YOUR LA 1. Have you YES 2. Have you pardoned 3. Has anyon	hed statement given AST RENEWAL Of been detained, consisted of the properties of the	ring complete detain OR DATE LICENSE ited, arrested, indice of a felony which restand record expunge gment against you	FIRST ISSUED IF THe ted or summoned into mains a part of your reded? YES \(\square\) NO \(\square\)	answer to any question IS IS YOUR FIRST RENEWAL court for a felony? cord or, have you been subject of which involved fraud
4. Has any	resentation? YES governmental age se? YES	ncy (including this	agency) issued a disci	plinary action against you or
The QUALIFYIN	G PARTY MUST :	sign this document		
		_		
		·		
				For Office Use Only
OTE: RENEWAL IS YOUR RESPONSIBILITY! IF YOU HAVE HAD A HANGE OF CITIZENSHIP SINCE YOUR LAST RENEWAL, YOU				
			J . · . —	
IUST PROVIDE US WITH PROOF YOU HAVE THE RIGHT TO LIVE .ND WORK IN THE UNITED STATES.				-
IND WORK IN THE UNITED STATES.				Check #

Received: