## **APPLICATION CHECKLIST**

# PAWNSHOP SPECIAL REGULATORY APPLICATION GLENDALE CITY CODE CHAPTER 21

(EVERY ITEM MUST BE COMPLETE BEFORE APPLICATION AND FEES CAN BE ACCEPTED)

Two Fingerprint Cards obtained from an independent fingerprint agency
Completed and Signed Applications:
*Business license application *Special Regulatory Application
Photo Identification
License Eligibility Form (If Sole Proprietor)
Signed Acknowledgement Statement
Signed Fingerprint Privacy Rights Notice

#### One of the following:

Trade Name Registration Articles of Incorporation Articles of Organization Partnership Agreement

#### Fees Due:

Application fee - \$85.00 License fee - \$155.00 (Pro-rated quarterly) Fingerprint processing fee - \$30.00

#### Application packet is processed by:

- 1. Tax and Licensing Division
- 2. Building Safety Department
- 3. Police Department
- 4. Planning and Zoning Department
- 5. Fire Safety Department
- 6. Approval/Denial Timeframe is approximately 6-8 weeks

Upon denial the Finance Department shall deny the application if any of the requirements have not been met. In the event of denial the applicant will be notified by mail of the denial and the reason. The applicant may appeal such denial pursuant to the provisions of the code.



**Licensing Office** 5850 West Glendale Avenue Glendale, Az 85301-2599 623-930-3190

Email: taxlic@glendaleaz.com

Business License #:\_\_\_\_\_

## **BUSINESS LICENSE APPLICATION**

ALL LICENSE APPLICATION FEES ARE <u>NON-REFUNDABLE</u>—LATE FEES APPLY IF NOT REGISTERED WITHIN 30 DAYS OF BUSINESS START DATE—INCOMPLETE APPLICATION PACKETS MAY RESULT IN A DELAY IN PROCESSING OR DENIAL OF THIS APPLICATION.

Section I. APPLICATIO							
☐ New Business ☐ Non-Profit (Federal Exemption Certificate required) ☐ Special Previous City License (if applicable): egulatory ☐ Event/Stadium ☐ New Owner of Existing Business ☐ Change in Business ocation							
Section II. BUSINESS I	NFORMATION—	Verify that your business	is located i	n Glendale	https://w	ww.aztaxes.gov/	/AddressLookup/Index/
Business Name (Comp	oany, DBA, or Indi	vidual; first name, last na	me):			Legal Entity Nar	me (Corporation, LLC, etc.):
Physical Business Stre	et Address (i.e. c	ommercial property, reta	il store, res	taurant— <u>NC</u>	P.O. Box	or PMB addresse	es):
City, State, Zip Code (	+4):			Ві	usiness Ph	none #:(10 digits)	
Glendale Business Sta	rt Date:	E-Mail Address:					
		AZ State TPT License #:			siness Tax N/FEIN/SS		
Section III. MAILING A	ADDRESS INFORM	MATION					
Enter Name (if differe	nt from Section II	above) or "Care of" Nam	e:				
Mailing Address:							
City, State, Country, Z	ip Code (+4):			1	Phone # (:	10 digits):	
Section IV. BUSINESS	OWNERSHIP—m	ust complete the Owner	ship Supple	mental Forn	n		
	☐ Sole/Ir	ndividual 🗌 Partr	iership 🗆	Trust 🗆 LLC	C □ Co	rp./Inc., State	
Owner/Officer Name:						Title:	
Home Address:						SSN #:	
City, State, Zip Code (-	+4):					Phone # (10 digi	its):
Owner/Officer Name:						Title:	
Home Address:						SSN #:	
City, State, Zip Code (-	+4):					Phone #:	
	TYPE—check all ti	hat apply and provide a d	detailed des	scription of y	our busir	ness	
Do you sell Liquor?	☐ Retail	☐ Restauran	-	☐ Hotel/Mo		☐ Retail Foo	
☐ Yes ☐ No	☐ Advertising	☐ Job Printin	-	☐ Amuseme	ent		Property Rental
Reporting Method:	☐ Telecommun					☐ Contracti	•
☐ Cash ☐ Accrual	☐ Use Tax (Gler☐ Home Builde		☐ Other_	⊔ Use Tax (d	out-or-sta	te business with	no Az nexus)
Describe Nature of Bu	siness:						
Section VI. GLENDALE	BUSINESS PREM	IISE STATUS—must comp	lete applica	able Busines	s Premise	Supplemental o	r Questionnaire
Do you own the Busin	ess Premises?	☐ Yes ☐ No					Is this a Home-Based Business?
Do you lease the Busin	ness Premises?	☐ Yes ☐ No					□ Vos □ No
If Yes, indicate legal Owner of property manager name and address  If yes, you MUST complete the Home							
bo you refit a portion of the Business Fremises to another entity of Business:							
Postmarks are not accepted as proof of timely registration. Please remit all fees with this application and make checks payable to the City of Glendale.  I certify that the statements made in this application are true and complete to the best of my knowledge. I accept the license authorized and issued in response to this application with the condition that I report timely and pay any and all privilege taxes to the Arizona Department of Revenue due to the City of Glendale. I understand that the information I provide on this application can be used for collection purposes and may become public information. I specifically understand and acknowledge that if I provide a cellular telephone number and email address on this application, the City of Glendale or any collection agencies contracted by the City can use this contact information for collection purposes on any unfiled or past due balances. IF APPLICABLE, I UNDERSTAND THAT BY LAW, I MAY BE LIABLE FOR ANY UNPAID TAX DUE BY THE FORMER OWNER(S) OF THIS BUSINESS.							
Printed Name:			Signatur	e:			
Title (Owner/Officer/	Statutory Agent):						
Date:			Phone:				

<b>Business</b>	icense #:



#### City of Glendale-Licensing Office

5850 West Glendale Avenue Glendale, Arizona 85301-2599 623-930-3190

Email: taxlic@glendaleaz.com

# SPECIAL REGULATORY INDIVIDUAL LICENSE

APPLICATION AND QUESTIONNAIRE IMPORTANT NOTE—AGE REQUIREMENTS

YOU MUST BE AS LEAST 18 YEARS OF AGE AT THE TIME OF THE APPLICATION TO OBTAIN A LICENSE.

This application must be filed and a license obtained before you can lawfully engage in any business in Glendale. The application and fingerprinting fees are nonrefundable. Any license issue is non-transferable between persons or locations.

SECTION I. APPL	ICANT INFORMATIO	N								
First Name:		M.I:	Date of I	Birth:						
Address:	SSN #:									
City, State, Zip Cod	le (+4):					Phone #:				
Government Issue	I.D #:	Type:	Email:			Sex:				
Age:	Weight:	Height:	Color of Eyes:			Color of	Hair:			
Have you ever bee list ALL prior char Failure to disclose to resubmit an apparagnment.	and dates.  not be allowed		Yes No							
Have you ever had revoked, denied, r suspending such attach to this applicense.	revoking or paper and		Yes No							
SECTION II. PRE	VIOUS HOME ADDR	ESS INFORMATIO	N							
	Plea	se list all home ac	ldress during th	ne last	5 years:					
Home Address #1:						Date Mov	ved:			
Home Address #2:						Date Moved:				
Home Address #3:						Date Moved:				
Home Address #4:						Date Moved:				
Home Address #5:						Date Mov	/ed:			
SECTION III. EM	PLOYMENT HISTORY									
	Please list y	our complete emp		y for the From:	e last 5 years:					
Employer Name:	To:									
Employer Name:	To:									
Employer Name:	То:									
Employer Name:	To:									
Thi	of Glend	ale:								
Employer Name: Employer Address:										

SECTION IV. LICENSE AND PERMIT INFORMA									
Please list licenses/permits issued to y	Please list licenses/permits issued to you relating to a Special Regulatory or an Adult Business License:								
License:	Jurisd	liction:	Date:						
License: Jurisdiction: Date:									
IMPORTANT NOTE TO BUS	SINESS OF	PERATORS WITH FACILITIES IN GLEI	NDALE						
Include a sketch of diagram with your application showing the configuration of the proposed business premises, including a statement of total floor space. The sketch or diagram should be oriented to the north or to some designated street or object. To the extent applicable, show the location of, rest rooms, general patron areas, clearly designated areas in which patrons are not permitted, show the location of all manager's stations, viewing rooms, video cameras and monitors installed for monitoring purposes, stage areas, and any other distinct rooms or areas on the premises. The sketch or diagram shall be drawn to a designated scale or drawn with marked dimensions of the interior of the premises to an accuracy of plus or minus one foot. The premises are subject to inspection by the City for all information contained in this application.									
IMPO	ORTANT N	IOTE TO APPLICANT							
I certify the statements made in this applicati complied with all statues, ordinances, at The issuance of a license by the City of Glendactivity in violation or any other law or regular authorized and issued to response to this incomplete forms may delay processing. Faltelephone number may be viewed as your require your sequire your email address, you are acled Glendale regarding your account as well as Please see the City of Glendale privacy states.	and other idale shall ulation to application applicati	requirements affecting public peace, I in no way be construed as permission which such activity by may be subject on. I understand the application fee is ovide current information in regards to this application withdrawn. Any with ply and pay any new fees.  Ing that you may receive infrequent elbout services that may affect doing be	nealth, and safety. In to operate a business It. I accept the license I non-refundable and I your address and/or I drawl of application will I mails from the City of I usiness with the City.						
Print Name:	Print Name: Title (Owner/Officer/Statutory Agent):								
Signature:		Phone #:	Date:						

5850 W. Glendale Ave. Glendale, AZ 85301 www.glendaleaz.com/ taxandlicense



## LICENSE ELIGIBILITY FORM

	:				 										 		
Account #	1																
	1																

This form must be completed by sole proprietorships <u>only</u>. If the sole proprietorship is a married couple, both spouses must complete a form. This is required under House Bill 2745 which was signed into law on May 1, 2008.

Please CHECK THE BOX next to the document indicating lawful presence, SIGN AND RETURN THIS FORM with a COPY OF THE DOCUMENT chosen.

An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
A driver license issued by a state that verifies lawful presence in the United States.
A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
A United States certificate of birth abroad.
A United States passport.
A foreign passport with a United States visa.
An I-94 form with a photograph.
A United States citizenship and immigration services employment authorization document or refugee travel document.
A United States certificate of naturalization.
A United States certificate of citizenship.
A tribal certificate of Indian blood.
A tribal or bureau of Indian affairs affidavit of birth.

This provision does not apply to an individual, if <u>all\_</u>of the following apply:

- 1. The individual is a citizen of a foreign country or, if at the time of application, the individual resides in a foreign country <u>and</u>;
- 2. The benefits that are related to the license do not require the individual to be present in the United States in order to receive those benefits.

Signature of Applicant	Printed Name of Applicant	
Date		
Signature of Municipal Employee	 Date	

## Tax & License Division

5850 West Glendale Avenue Glendale, Arizona 85301-2599 (623) 930-3190



I,, hav	ve reviewed a copy of Glendale City Code, Chapter 21
owner of the business, I am fully Chapter 21 are enforced at all tir	us business regulations. I acknowledge that as the responsible for ensuring that all provisions of mes. I understand that failure to comply with Chapter 21 of my license. Non-compliance of any provision of Chapter as indicated.
Print name	_
Signature	 Date



Tax & Licensing Division 5850 W Glendale Ave Glendale AZ 85301 Ph: 623-930-3190 taxlic@glendaleaz.gov

## **FBI Notification of Applicant Privacy Rights**

Dear Applicant,	
Your fingerprints will be used to check the criminal history red	cords of the FBI.
If you have a criminal history record, the officials making a de- regulatory license must provide you the opportunity to o information in the record. You will be afforded 10 days to cor so) before officials deny you the special regulatory license record.	complete or challenge the accuracy of the rrect or complete the record (or decline to do
The procedures for obtaining a change, correction, or updat forth in Title 28, Code of Federal Regulations (CFR), Section review and challenge your FBI criminal history record can be "Identity History Summary Checks" or by calling (304) 625-559	16.30 through 16.34. Information on how to e found at <a href="www.fbi.gov">www.fbi.gov</a> under "Services" then
To obtain a copy of your Arizona criminal history in order to contact the Arizona Department of Public Safety Criminal Histora fingerprint card and a Review and Challenge packet. Inform can be found on the DPS website ( <a href="www.dps.gov">www.dps.gov</a> ).	ory Records Unit at (602) 223-2222 to obtain
Name (Print):	
Signature:	Date:



Tax & Licensing Division 5850 W Glendale Ave Glendale AZ 85301 Ph: 623-930-3190 taxlic@glendaleaz.gov

## FINGERPRINTING INFORMATION/VERIFICATION FORM

The following instructions are intended to help you and your chosen fingerprinting agency expedite the licensing process:

- You will need to take a copy of your application to an independent fingerprinting agency or to your local law enforcement agency. PLEASE CALL THE AGENCY AHEAD to be sure they do fingerprinting. Not all law enforcement agencies offer this service.
- 2. The fingerprinting agency will keep the application, take a copy of your government issued photo ID to verify your identity and take two (2) sets of fingerprints.
- 3. You may go to any outside agency to be fingerprinted; these are a few suggestions. Contact the agency for fees and hours available.

Glendale City Hall Arizona Livescan 5850 W Glendale Ave (1st Floor) Various locations Mondays 9:00 am – 11:00 am & 1:00 pm – 4:00 pm (602) 246-3444 (623) 930-3190

#### **ATTENTION FINGERPRINT TECHNICIAN:**

Please follow the instructions below for fingerprinting this applicant.

- 1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
- 2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
- 3. Fill out the information in the boxes below. Please print clearly.
- 4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant. Do not give the applicant the fingerprint card without first sealing it inside the envelope.

**PRINT** the following information:

Date	Name of Applicant							
Name of Fingerprint Technician (PRINT):								
Fingerprint Technician's Agency/Company Name								
Type of Photo ID provide	ed (check one):							
Driver's Licens	se/MVD Issued ID	Other (Please specify)						
Passport								

## **Privacy Act Statement**

## This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

## Declaración de la Ley de Privacidad

## Esta declaración de la ley de privacidad se encuentra al dorso del FD-258 tarjeta de huellas digitales.

Autoridad: La adquisición, preservación, e intercambio de huellas digitales e información relevante por el FBI es autorizada en general bajo la 28 U.S.C. 534. Dependiendo de la naturaleza de su solicitud, la autoridad incluye estatutos federales, estatutos estatales de acuerdo con la Pub. L. 92-544, Órdenes Ejecutivas Presidenciales, y reglamentos federales. El proveer sus huellas digitales e información relevante es voluntario; sin embargo, la falta de hacerlo podría afectar la terminación o aprobación de su solicitud.

Propósito Principal: Ciertas determinaciones, tal como empleo, licencias, y autorizaciones de seguridad, podrían depender de las investigaciones de antecedentes basados en huellas digitales. Se les podría proveer sus huellas digitales e información relevante/ biométrica a la agencia empleadora, investigadora, o responsable de alguna manera, y/o al FBI con el propósito de comparar sus huellas digitales con otras huellas digitales encontradas en el sistema Next Generation Identification (NGI) del FBI, o su sistema sucesor (incluyendo los depósitos de huellas digitales latentes, criminales, y civiles) u otros registros disponibles de la agencia empleadora, investigadora, o responsable de alguna manera. El FBI podría retener sus huellas digitales e información relevante/biométrica en el NGI después de terminar esta solicitud y, mientras las mantengan, sus huellas digitales podrían continuar siendo comparadas con otras huellas digitales presentadas a o mantenidas por el NGI.

Usos Rutinarios: Durante el procesamiento de esta solicitud y mientras que sus huellas digitales e información relevante/biométrica permanezcan en el NGI, se podría divulgar su información de acuerdo a su consentimiento, y se podría divulgar sin su consentimiento de acuerdo a lo permitido por la Ley de Privacidad de 1974 y todos los Usos Rutinarios aplicables según puedan ser publicados en el Registro Federal, incluyendo los Usos Rutinarios para el sistema NGI y los Usos Rutinarios Generales del FBI. Los usos rutinarios incluyen, pero no se limitan a divulgación a: agencias empleadoras gubernamentales y no gubernamentales autorizadas responsables por emplear, contratar, licenciar, autorizaciones de seguridad, y otras determinaciones de aptitud; agencias de la ley locales, estatales, tribales, o federales; agencies de justicia penal; y agencias responsables por la seguridad nacional o seguridad pública.

A partir de 30/03/2018