



TOWN OF THATCHER PEDDLER'S LICENSE APPLICATION

Please Legibly Print

APPLICANT INFORMATION

Applicant Name _____ Phone _____
 Applicant Address _____ City _____ State _____ Zip _____
 Firm or Business Name _____ Phone _____
 Business Address _____ City _____ State _____ Zip _____
 Business Mailing Address _____ City _____ State _____ Zip _____
 Applicant and/or Business Email Address _____

LICENSE & TAX NUMBERS

DRIVERS LICENSE & STATE _____
 STATE OF AZ TAX ID NUMBER (TPT#) _____ (If Applicable)
 FEDERAL TAX ID NUMBER _____ (If Applicable or Owner's Social Security #)
 CONTRACTOR'S LICENSE NUMBER _____ (If Applicable)

BUSINESS INFORMATION

Description of Business _____
 Dates you plan to conduct business: _____ Locations you plan to conduct business: _____

Do you own the property on which the business will be conducted? YES NO
 Will a vehicle be used to distribute? YES NO
 If yes, please list: Make _____ Style _____ Year _____ License Plate # _____

EMERGENCY CONTACT PERSON

Name _____ Phone _____
 Address _____ City _____ State _____ Zip _____

I hereby certify that the statements herein are true and complete and that this business is in compliance with any and all regulations of the described business.

SIGNATURE OF APPLICANT

DATE

A fee of \$30.00 (accepted forms of payment: cash, checks, money orders) must accompany this application.

Once issued the license is good for 3 months from the date of purchase.

Mail completed form and payment to Town of Thatcher, PO Box 670, Thatcher, AZ 85552.

Any questions regarding this form please contact 928-428-2290 Ext. 2230

ZONING OFFICE USE ONLY

Reviewed For Zoning Compliance By _____ Date _____
 Approved Yes No If "NO" reason for disapproval _____

CLERK'S OFFICE USE ONLY

License Number _____ Paid _____ Receipt Number _____
 Clerk's Office Staff _____ Date _____