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### IF AFTER REVIEWING THIS PACKET YOU HAVE ANY QUESTIONS PLEASE DO NOT HESITATE TO CONTACT LICENSE SERVICES

Online: <a href="www.phoenix.gov/licenseservices">www.phoenix.gov/licenseservices</a>

In Person: 200 W. Washington St., 1st Floor

Phoenix, AZ, 85003

Email: <u>licenseservices@phoenix.gov</u>

Phone: 602-262-4638 #4

### SECTION 1. PROCESS SUMMARY & PROCESSING TIME FRAMES

### **Process Summary**

- Zoning Check (recommended) Prior to submitting an application to License Services, the applicant verifies with the Planning and Development Department (PDD) that the proposed location has adequate zoning for the proposed activity.
- Applicant submits an application to License Services:
  - Application form(s), fee(s), and applicable items listed in the Administrative Completeness Review section and Substantive Review section of this packet.
  - Submits the application 90 days in advance to allow for processing time frames.
- Applicant gets fingerprinted at the time of application. [Please reference FBI Privacy Act Statement]
- Administrative Completeness Review [Pursuant to Arizona Revised Statutes (ARS) 9-835(F)]
  - Within the administrative review time frame, License Services conducts an administrative completeness review of the license application paperwork submitted by the applicant.
    - Applicant must submit the items listed in the Administrative Completeness Review section of this packet.
  - License Services determines whether there are any application deficiencies.
  - o If application deficiencies are found, a Notice of Deficiency is issued to the applicant.
  - If a Notice of Deficiency is issued to the applicant, the administrative completeness time frame and overall time frame for processing the application are suspended until all requested information is received by License Services.
- Substantive Review [Pursuant to ARS 9-835(F)]
  - After receiving all items listed in the Administrative Completeness Review section of this packet, and within the substantive review time frame, License Services conducts a substantive review of the application and determines whether any corrections are needed.
    - If any corrections are needed, a Request for Correction(s) Notice is issued to the applicant.
    - If a Request for Correction(s) Notice is issued to the applicant, the substantive review time frame and overall time frame for processing the application are suspended as of the date on the Notice of Correction, until all requested information is received by License Services.
  - o Fingerprints are forwarded by License Services to DPS for processing.
  - License Services sends the application to the appropriate department(s) for review and recommendation.
- Application Results:
  - Within the overall processing time frame, License Services takes action on the application (approves or denies the application).
    - If the application is approved, the license will be issued to the applicant after the license fee is paid.
    - If the application is denied, a written Notice of Denial will be issued to the applicant containing the reasons for denial and information on the process to appeal License Services' decision and request a hearing with the License Appeal Board.

| Overall Processing Time Frame: 90 days        |                               |  |  |  |  |  |  |
|---|-------------------------------|--|--|--|--|--|--|
| Administrative Completeness Review Time Frame | Substantive Review Time Frame |  |  |  |  |  |  |
| 30 days                                       | 60 days                       |  |  |  |  |  |  |

### **SECTION 2. FINGERPRINTS - FBI PRIVACY ACT STATEMENT**

#### NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. <sup>1</sup> These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained. <sup>2</sup>
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <a href="https://www.fbi.gov/services/cjis/identity-history-summary-checks">https://www.fbi.gov/services/cjis/identity-history-summary-checks</a> and <a href="https://www.edo.cjis.gov">https://www.edo.cjis.gov</a>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via h <a href="ttps://www.edo.cjis.gov">ttps://www.edo.cjis.gov</a>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.<sup>3</sup>

28 CFR 20.21(c), 20.33(d) and 906.2(d).

Updated 11/6/2019

Written notification includes electronic notification, but excludes oral notification.

<sup>&</sup>lt;sup>2</sup> https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

<sup>&</sup>lt;sup>3</sup> See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c);

### **SECTION 3. APPLICATION PROCESS STEPS (A-E)**

- A. ZONING CHECK (RECOMMENDED): THE APPLICANT VERIFIES THAT THE ZONING AT THE PROPOSED LOCATION IS ADEQUATE FOR THE PROPOSED ACTIVITY, BEFORE SUBMITTING AN APPLICATION TO **LICENSE SERVICES.** Some activities are not allowed in certain zoning districts, and other activities are only allowed if a Use Permit is obtained prior to beginning operations. Completing the Zoning Check may prevent unexpected costs or the denial of the application. To complete a Zoning Check:
  - Complete the "Zoning Check" form (included in this packet)
    - Call the Planning and Development Department (PDD) and ask whether a list/"survey" of all existing secondhand uses within a certain distance of the proposed location must be submitted with the Zoning Check form. If so, obtain details about this requirement from PDD. Phone #: 602-262-7131, #6.
  - Take the completed Zoning Check form (and survey if required) to PDD for review/sign-off.
    - o PDD is located in City Hall, 200 W. Washington St., 2nd Fl., Phoenix, AZ 85003.
  - Review the PDD results listed on the "Zoning Check" form:
    - o If the zoning of the proposed location is adequate and there are no outstanding issues, submit the signedoff "Zoning Check" form to License Services along with the Secondhand Dealer application.
    - If the proposed activity is only allowed at the location with a Use Permit: The Use Permit should be obtained before submitting the application to License Services, or the application may be denied.
    - If the proposed activity is not allowed at the proposed location (at all): This may be grounds for the denial of the license application. The applicant may want to consider a different location.

#### **B. APPLICATION SUBMITTAL:**

- Applications must be submitted directly to the City of Phoenix, City Clerk Department, License Services Office located at 200 W. Washington St., 1st floor, Phoenix, AZ 85003.
- Apply 90 Days in Advance (overall application processing time frame): It may take up to 90 days to process the application. This includes a typical, minimum 40 days processing time for fingerprints through DPS, plus time for City of Phoenix departmental reviews and any departmental inspection(s)/meeting(s).
- Apply In Person (recommended): Due to fingerprinting requirements, applying in-person at the License Services Office is recommended. Persons are fingerprinted near License Services.
- Make an Appointment: To help expedite service, call License Services to make an appointment.
- Sign-In: Upon arriving to License Services, applicants must sign-in on the lobby computer for assistance. Applicants will be helped at the time of their appointment, or if they do not have one, in the order in which they
- Have Forms, Administrative Completeness Review Items & Substantive Review Items Ready: To avoid processing delays or interruptions, applicants should ensure that all application forms are filled out, and all required items are available and ready, at the time of application. Otherwise, it can take up to an hour to submit an application or the applicant may need to make multiple trips to License Services.
- **Submit** the following items to License Services (forms available online):
  - o Zoning Check Form (signed by PDD)
  - **Application Section 8** of this application packet
    - Please include an Email Address for License Services Notices: The applicant will be notified of any application deficiencies and/or issues related to the application through email.
  - Application Individual Information Page(s); as required by Phoenix City Code (PCC)
  - Items listed in the Administrative Completeness Review Information section (included in this packet)
  - Items listed in the Substantive Review Information section (included in this packet)
  - Application Fee(s): Refer to the Application section for fee amounts (included in this packet)
    - Due Upon Applying: The application fee is due at the time the application is submitted.
    - Non-refundable: The application fee is non-refundable. Once the application is submitted to License Services, the application fee will be due and will not be refunded, even if the application is withdrawn or
    - Non-transferable: The application fee for one location/business can not be transferred to another location/business due to application withdrawal or denial.
    - Payment Center: Fees are paid at the City of Phoenix Payment Center (not in the License Services Office) When applying in person, allow enough time to complete both the application submittal and payment. Arriving

close to closing time (after 4pm or earlier, depending on the volume of walk-in customers) may not allow enough time for application submittal and payment on the same day.

- Other Fees: Additional fees may apply if you require other permits/services from other City Departments or County/State Agencies. The payment of any such applicable fees, are payable as stipulated by the corresponding issuing department(s)/agency(s). Examples:
  - PDD: Assembly Permits, Use Permits, Certificate of Occupancy
  - Finance Department: Privilege (Sales) Tax License
  - State Department of Revenue: State Sales Tax License
  - State Department of Weights & Measures: Device License

#### C. LICENSE SERVICES ADMINISTRATIVE COMPLETENESS REVIEW:

- Within the administrative completeness time frame, License Services evaluates the application for administrative completeness and determines whether any required items listed in the Administrative Completeness Review section of this packet are missing.
- License Services will issue a Notice of Deficiency, if any required items are missing.
- If a Notice of Deficiency is issued, the administrative completeness time frame and overall time frame for processing the application are suspended until all requested information is received by License Services.

#### D. SUBSTANTIVE REVIEW:

- After receiving all items listed in the Administrative Completeness Review section, and within the substantive review time frame, License Services conducts a substantive review of the application and determines whether any corrections are needed. License Services will issue a Request for Correction(s) notice to the applicant, if any corrections are required. If a Request for Correction(s) Notice is issued, the substantive review time frame and overall time frame for processing the application are suspended as of the date on the Notice of Correction, until all requested information is received by License Services.
- Fingerprints are forwarded by License Services to DPS for processing. The typical, minimum processing time for fingerprints is approximately 40 days. The fingerprints submitted with this application will be used to check the criminal history records of the Arizona Department of Public Safety (DPS) and Federal bureau of Investigation (FBI) to determine the applicant's suitability for licensing. Pursuant to A.R.S. Section 41-1750(G)7 and R13-1-08 of the Arizona Administrative Code, an individual may review and challenge criminal history information maintained by DPS. For more information contact DPS by phone at: 602-223-2222. The procedures for changing, correcting, or updating FBI Criminal History Record Information are set forth in Title 28, Code of Federal Regulations, Section 16.34.
- For more information contact the FBI by phone at: 304-625-3878 or on-line at: <a href="www.fbi.gov">www.fbi.gov</a>. Please also review the FBI Privacy Act Statement.
- Departmental Review(s): The application will be sent to the following Department(s) for review and recommendation. The reviewing Department(s) may request additional information or issue notices of deficiency or requests for corrections to the applicant directly.
  - Police Department (PD): Reviews the information provided on the application and provides a recommendation to License Services. PD reviews the background check results received from DPS and the applicant's criminal background history. PD contacts the applicant to set-up a required meeting/training to go over the City Code requirements related to the license. P.C.C. §19-6(C)10 For more information about the PD process, call PD at: 602-534-0817.
  - Planning and Development Department (PDD): PDD reviews the zoning requirements related to the
    application (this is separate from the initial zoning check form). The proposed business location may have
    restrictions or require a Use Permit (additional fees may apply). For more information contact PDD at 602262-7131, #6 or online at <a href="https://www.phoenix.gov/pdd">www.phoenix.gov/pdd</a>.

#### **E. APPLICATION RESULTS:**

- If the application is approved by the City:
  - o The applicant can only operate after obtaining a license certificate from License Services.
  - Applicant will be notified of the approval and the prorated amount due for the annual license fee.
  - The license certificate will be issued once the corresponding annual license fee is paid.
  - The license certificate can be issued through mail or in person at the License Services Office.
- If the application is denied by the City:
  - License Services will issue a Notice of Denial to the applicant through mail.

- The Notice of Denial will include information about the process to appeal the denial. Appeal procedures are very specific and subject to strict deadlines. Please refer to P.C.C. Chapter 19, Article II for the rules related to appeals.
- For a list of reasons that could cause your application to be denied, refer to P.C.C. Chapter 19.

### **SECTION 4. LAWS**

- Arizona Revised Statutes (A.R.S.): Title 44, Ch. 11 & Title 9, Ch. 7, Article 4. Online at: www.azleg.gov/
- Phoenix City Code (P.C.C.): Chapter 19. Online at: www.phoenix.gov/licenseservices

Basic Summary of Rules/Laws: For a more complete list of rules, please refer to the above listed online resources.

- Mercantile Business Definition: Mercantile business means an auctioneer, an auction house, a scrap metal dealer, or a secondhand dealer. Each type of business requires a separate application/license. P.C.C. §19-1
- **Secondhand Dealer Definition:** Any person who is engaged in conducting, managing, facilitating or carrying on the business of buying, selling, trading, exchanging, receiving on consignment or otherwise dealing in secondhand goods, wares, merchandise, or articles, whether such business be the principal or sole business so carried on, managed, or conducted or be merely incidental to, in connection with, or a branch or a department of some other business. P.C.C. §19-1
- **Secondhand Goods Definition:** Any new or used property that has been sold, traded, exchanged, consigned or otherwise disposed of by its original owner. P.C.C. §19-1
- License Required: It is unlawful for any person to operate as a Secondhand Dealer within the City of Phoenix without possessing a valid Secondhand Dealer license. It is unlawful for any person to operate as a Secondhand Dealer at a location for which a person has not obtained a license for. Example: If the same business owner operates at multiple locations, each location is required to have a separate license. P.C.C. §19-3
- Exemptions from Licensing: Specific types of entities/activities do not require a Secondhand Dealer license. Example: Any organization that is exempt from federal income tax under Section 501 of the Internal Revenue Code. For more information refer to P.C.C. §19-3.01 before applying.
- License issued to a Licensee for a Specific Location: Each Secondhand Dealer license is issued to a specific business/person for a specific location. P.C.C. §19-3
  - o If more than one mercantile business is conducted at a specific business location, a separate license is required for each mercantile business. Example: If a business operates as a Scrap Metal Dealer and a Secondhand Dealer at the same location, the business must obtain both a Scrap Metal Dealer License AND a Secondhand Dealer License for that one location. If two separate Secondhand Dealer businesses operate out of one location, each Secondhand Dealer Business would need to obtain a separate license for the same location.
- License is Not Transferable from Person to Person (natural or fictitious): Example: if a person applies as an individual and then decides to operate as a fictitious entity (LLC or Corporation), they will need to file a new application under the new ownership of the fictitious entity. The same rule applies if the original fictitious entity changes to a different fictitious entity, a new license for the new entity will be required -- even if the members within the entity are the same. P.C.C. §19-3
- An Application is Required for a Change of Designated Agent or Controlling Person(s) within a Fictitious Entity: If a fictitious entity (LLC or Corporation) changes its members or its designated agent, each new member or designated agent must submit an application to License Services for approval. No change may be made to a controlling person or designated agent of a licensee until the new person has successfully completed the application process described in P.C.C. Section 19-6, provided that the requirement to meet with the Police Department shall not apply. Example: If an entity (LLC/Corporation) had two controlling persons at the time their Secondhand Dealer License was approved and issued, and a third person is later added to the same entity, that third person must submit an application to License Services for approval. For more information, refer to the Secondhand Dealer Change of Controlling Person or Designated Agent Application form. P.C.C. §19-8.03
- An Application is Required for a Change of Business Location (Relocation Application): An existing Secondhand Dealer License may be transferred from one location within the City of Phoenix to another location within the City of Phoenix. To do this, the owner of the existing active Secondhand Dealer License must submit a Secondhand Dealer Relocation Application to License Services and be approved before operating at the new location (fees apply). For more information refer to the Secondhand Dealer Relocation License Application. A relocation application can not be filed for a pending license. P.C.C. §19-8.02

- Reporting Transactions & Retention of Property: There are specific requirements for Secondhand Dealers to report certain transactions to the City of Phoenix Police Department, Pawnshop Detail. Any items required to be reported must be held by the Secondhand Dealer at the business location (or otherwise pre-approved location) for a specific time and in a specific manner. For more information, contact the Police Department at: 602-534-0817. P.C.C. Ch. 19, Article IV
- Updates/Changes to General Licensing Information: Any changes/updates to general licensing information must be reported to License Services on the Secondhand Dealer Information Update form within 10 calendar days of the change. Examples include changes in business (DBA) name or business mailing address. Refer to Secondhand Dealer Information Update form. This does not include changes to designated agents/controlling persons or business address relocations as described previously. P.C.C. §19-8.04
- Persons may receive clarification on any interpretation or application of a statute, ordinance, code or authorized substantive policy statement affecting the procurement of this license/approval by providing a written request to License Services, Attention Deputy City Clerk. The written request must follow the guidelines established in Arizona Revised Statute, Section 9-839.

#### A.R.S. § 9-834. Prohibited acts by municipalities and employees; enforcement; notice

- A. A municipality shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, ordinance or code. A general grant of authority does not constitute a basis for imposing a licensing requirement or condition unless the authority specifically authorizes the requirement or condition.
- B. Unless specifically authorized, a municipality shall avoid duplication of other laws that do not enhance regulatory clarity and shall avoid dual permitting to the maximum extent practicable.
- C. This section does not prohibit municipal flexibility to issue licenses or adopt ordinances or codes.
- D. A municipality shall not request or initiate discussions with a person about waiving that person's rights.
- E. This section may be enforced in a private civil action and relief may be awarded against a municipality. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against a municipality for a violation of this section.
- F. A municipal employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the municipality's adopted personnel policy.
- G. This section does not abrogate the immunity provided by Section 12-820.01 or 12-820.02.

A full copy of the Arizona Revised Statutes may be found on-line at:

http://www.azleg.gov/ArizonaRevisedStatutes.asp or you may contact the Arizona Secretary of State Department, Arizona State Library, Archives & Public Records Division by calling 602-926-3870.

### SECTION 5. ADMINISTRATIVE COMPLETENESS REVIEW INFORMATION

### UPON RECEIVING AN APPLICATION, LICENSE SERVICES WILL CONDUCT AN ADMINISTRATIVE COMPLETENESS REVIEW.

#### THE FOLLOWING ITEMS ARE REQUIRED AT THE TIME OF APPLICATION:

- A Secondhand Dealer License Application (section #7 of the application packet) PCC 19-6(A)
  - o Including a completed "Application Individual Information Page" for:
    - The applicant
    - Each controlling person as defined by Phoenix City Code (PCC) 19-1.10
    - The designated agent (if any)
- A current government-issued photo ID for: PCC 19-6(A)4
  - The applicant
  - Each controlling person as defined by PCC 19-1.10
  - The designated agent (if any)
- Proof of lawful presence in the US:
  - The government-issued photo ID or other documents provided meet the requirements of PCC 19-6.01(A) for:
    - The applicant
    - Each controlling person as defined by PCC 19-1.10
    - The designated agent (if any)
- A complete set of fingerprints for: PCC 19-6(A)8
  - The applicant
  - Each controlling person as defined by PCC 19-1.10
  - The designated agent (if any)
- Payment of application fee(s) PCC 19-5
- If the applicant is a fictitious entity (corporation or LLC) PCC 19-6(A)10
  - A copy of the entity's organizational documents, including all applicable amendments.

### TO AVOID PROCESSING DELAYS OR INTERRUPTIONS ALL ITEMS LISTED ABOVE MUST BE SUBMITTED AT THE TIME OF APPLICATION

Pursuant to Arizona Revised Statutes 9-835(F)

### IF A NOTICE OF DEFICIENCY IS ISSUED TO AN APPLICANT DURING THE ADMINISTRATIVE COMPLETENESS REVIEW:

- The application submitted shall not be complete until all requested information in the issued Notice of Deficiency is received by License Services.
- The administrative completeness time frame and overall time frame for processing the application are suspended as of the date on the Notice of Deficiency, until all requested information is received by License Services.

### **SECTION 6. SUBSTANTIVE REVIEW INFORMATION**

AFTER RECEIVING ALL ITEMS LISTED IN THE ADMINISTRATIVE COMPLETENESS REVIEW SECTION, AND WITHIN THE SUBSTANTIVE REVIEW TIME FRAME, LICENSE SERVICES WILL CHECK THE APPLICATION PAPERWORK SUBMITTED BY THE APPLICANT FOR THE FOLLOWING:

#### ► APPLICANT PROVIDED AN APPLICATION WITH COMPLETE INFORMATION

- Application: Each question has an answer (no blanks). PCC 19-6(A)
- Application #3: Business address provided is accurate. PCC 19-6(A)3 (check online USPS)
- Application #4 & #5: Applicant indicated correct Ownership Type (#5) on the application. PCC 19-6(A)3 (For example, if ownership type is "individual" in #5, then #6 should list an entity's name.)
- **Application #5**: Application contains the full legal name of the applicant; as listed on ID, or if an entity, as listed on organizational documents. PCC 19-6(A)1 & PCC 19-6(A)9
- Application #6: If the applicant is a fictitious entity, applicant submitted the names of all controlling persons. PCC 19-6(A) (Names listed on the application match the names listed on organizing documents and any amendments to organizing documents.)
- **Application #8**: Mailing address provided for the purposes of receiving City notices/other licensing correspondence is accurate. PCC 19-6(A)11 (check online <u>USPS</u>)
- Application Individual Information Page(s): Applicant submitted a *complete* "Application Individual Information Page" for the applicant, each controlling person, and the designated agent (if any). PCC 19-6(A)

### ► APPLICANT SUBMITTED APPROPRIATE DOCUMENTS WITH APPLICATION

- I.D.: Applicant submitted a *current and valid* government-issued photo ID for the applicant, each controlling person, and the designated agent (if any). PCC 19-6(A)4
- **Proof of lawful presence in the US**: Applicant submitted a *current and valid* government-issued photo ID or other documents that meet the requirements of PCC 19-6.01(A) for lawful presence in the US for the applicant, each controlling person, and designated agent (if any),
- **Application Fee(s)**: The applicant paid all required application fees and fees were applied to the account properly. PCC 19-5
- Fictitious entity organizational documents: If the applicant is a fictitious entity (corporation or LLC), applicant submitted organizational documents and all applicable amendments that list all controlling persons pursuant to PCC 19-1.10. PCC 19-6(A)10

### APPLICANT IS IN COMPLIANCE WITH OTHER LAWS OF THE CITY, COUNTY AND STATE

- If the applicant is a corporation or LLC, they are currently in good standing with the <u>AZ Corporation</u> Commission. (check online)
- Applicant obtained/applied for a City Privilege (Sales) Tax License (if applicable)

#### TO AVOID DELAYS, APPLICATIONS MUST MEET THE REQUIREMENTS LISTED ABOVE AT TIME OF APPLICATION.

Pursuant to Arizona Revised Statutes 9-835(G)

**IF A REQUEST FOR CORRECTION IS ISSUED TO AN APPLICANT DURING THE SUBSTANTIVE COMPLETENESS REVIEW:**The substantive review time frame and overall time frame for processing the application are suspended as of the date on the Notice of Correction, until all requested information is received by License Services.

#### **OTHER ITEMS YOU MAY NEED\*:**

- Arizona Department of Weight and Measures (ADWM): If your business uses a measuring/weighing device, that device may need to be licensed by ADWM (additional fees may apply). For more information contact ADWM at 602-771-4920 or online at <a href="https://www.azdwm.gov">www.azdwm.gov</a>.
- **Arizona Department of Revenue (AZDOR):** Your business may require a State Transaction Privilege Tax (Sales) License. For more information contact AZDOR at 602-542-4576 or online: www.azdor.gov.

(\*NOT PART OF SUBSTANTIVE REVIEW, BUT MAY BE REQUIRED FOR YOUR BUSINESS TO OPERATE LEGALLY)

### SECTION 7. ZONING CHECK FORM FOR REGULATED BUSINESS LICENSE APPLICATIONS

The purpose of this form is to identify any *obvious* location deficiencies in relation to a Regulated Business License application <u>before</u> the license application is submitted to License Services. Deficiencies such as: Activity is not allowed in the zoning district, or activity is only allowed if a Use Permit is obtained, or activity is only allowed with restrictions, etc...

#### APPLICANT:

1) What type of license will you be applying for?

- Complete questions 1-5 on this form and submit the completed form to the Planning and Development Department (PDD) for review and comments at: 200 W. Washington St., 2nd Fl.
- Once this form has been reviewed by PPD, take the form to License Services to discuss PDD's comments.
- Pursuant to Zoning Ordinance Section 622.D.150.b, secondhand/used merchandise sales shall not be located within 1,320 feet of the same type of use, measured in a straight line in any direction, of the lot line of another such use regardless of the zoning district. Therefore, pursuant to 622.D.150.b(1), the PDD may require you to submit a "survey" listing all second hand uses within a certain distance of your proposed business location. If you are required to submit a survey, you may request a list of all currently licensed secondhand dealers in Phoenix from License Services (only the full list is available; it is not available by geographic area). However, since not all secondhand uses require a license from License Services (refer to the exemptions section of Phoenix City Code, Chapter 19), the list from License Services alone, will not be sufficient. For more information about the survey requirements, contact PDD.

| ,  | ,  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
| 2)   | What is the business address (location where the license will be used)?  |  |  |  |  |  |  |  |  |
|  | Must match the business address listed on the application submitted to License Services.   |  |  |  |  |  |  |  |  |
| 3)   | Describe <u>all</u> proposed business activities at the business address including products to be bought, sold, traded, or exchanged, and all services to be provided:   |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| 4)   | Will you have any type of outdoor display(s) at the business address location? ☐ Yes ☐ No  |  |  |  |  |  |  |  |  |
| 5) Will you store any products outdoors at the business address location? ☐ Yes ☐ No |  |  |  |  |  |  |  |  |  |
| apı  | s form does not constitute PDDs approval or final recommendation related to a Regulated Business License blication and is subject to change once the license application is submitted to License Services and reviewed ts entirety.  APPLICANT'S ACKNOWLEDGEMENT INITIALS: |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| C)   | DO NOT WRITE BELOW THIS LINE – FOR PLANNING AND DEVELOPMENT DEPARTMENT STAFF USE ONLY  |  |  |  |  |  |  |  |  |
| 6)   | Zoning District:   |  |  |  |  |  |  |  |  |
| 7)   | Is this location zoned properly for the proposed uses?   |  |  |  |  |  |  |  |  |
|  | ☐ Yes ☐ Yes, with a Use Permit ☐ Yes, as Accessory Use ☐ No  Comments:   |  |  |  |  |  |  |  |  |
|  | (PDD REVIEWER: PLEASE ADD COMMENTS AS NEEDED & PROVIDE CUSTOMER WITH A COPY OF ANY PERTINENT/LISTED ZONING ORDINANCE SECTIONS)   |  |  |  |  |  |  |  |  |
| 8)   | Is outdoor display or storage of merchandise allowed? □ Yes □ No Comments:   |  |  |  |  |  |  |  |  |
|  | (PDD REVIEWER: PLEASE ADD COMMENTS AS NEEDED & PROVIDE CUSTOMER WITH A COPY OF ANY PERTINENT/LISTED ZONING ORDINANCE SECTIONS)   |  |  |  |  |  |  |  |  |
| 9)   | Additional Zoning District Regulations: (i.e. Square Footage Requirements, Setbacks, etc.)   |  |  |  |  |  |  |  |  |
|  | (PDD REVIEWER: PLEASE ADD COMMENTS AS NEEDED & PROVIDE CUSTOMER WITH A COPY OF ANY PERTINENT/LISTED ZONING ORDINANCE SECTIONS)   |  |  |  |  |  |  |  |  |
| 10)  | Additional Information: (Non-Conformities, etc)  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| ۲D   | D Reviewer Name: Date:   |  |  |  |  |  |  |  |  |

For staff use: Staff Initials: \_\_\_\_\_ Account #: \_\_\_\_\_

| SECTION 8 | APPLICATION |  |
|-----------|-------------|--|

| SECTION 8. APPLICATION |   |   |  |   |  |  |  |  |  |  |  |
|------------------------|---|---|--|---|--|--|--|--|--|--|--|
| F<br>E<br>S            | New Application   Application fee is non-refundable (even if the application is withdrawn/denied) P.C.C. § 19-5(C)  |   |  |   |  |  |  |  |  |  |  |
| 1)                     | Date:   |   |  |   |  |  |  |  |  |  |  |
| Bu                     | siness Informat   | ion:  |  | _   |  |  |  |  |  |  |  |
| 2)                     |   |   |  |   |  |  |  |  |  |  |  |
| 3)                     | Business Address  |   |  |   |  |  |  |  |  |  |  |
|                        | Street Address (include Apt/Suite #), City, State & Zip Code  |   |  |   |  |  |  |  |  |  |  |
| •                      | plicant Informat  |   |  |   |  |  |  |  |  |  |  |
| 4)                     | ) Ownership Type (Choose One): ☐ Individual ☐ Partnership ☐ Husband/Wife ☐ Other: Corporation ☐ LLC (must attach organizational documents for LLC/Corporation)  |   |  |   |  |  |  |  |  |  |  |
| 5)                     | Name:   | □ Corporation   | LLC (musi attach organizatio             | nal documents for ELO/Gorporation)                                      |  |  |  |  |  |  |  |
| 3)                     | (If an individual/parti   | nership/husband & wife: list full name as shown of              | on ID. If a corporation or LLC, list the | entity name exactly as listed in the organizational documents)          |  |  |  |  |  |  |  |
|                        | Controlling person means any person who has a 20% or greater interest in the ownership or the earnings of the applicant or the business. A fictitious entity must designate one of its officers, members or general partners to complete and sign all application forms required of an applicant when there are no controlling persons.  >> Each individual listed in this section must complete and attach an "Individual Information Page."<< |   |  |   |  |  |  |  |  |  |  |
|                        | Name  | Title   | Name                                     | Title   |  |  |  |  |  |  |  |
|                        | Name  | Title   | Name                                     | Title   |  |  |  |  |  |  |  |
| 7)                     |   | the designated agent of the betted by the applicant or licensee |  | □ <b>Additional names attached</b> (if any). Designated agent means the |  |  |  |  |  |  |  |
|                        |   | >>The designated agent must complete an "Ind                    | lividual Information Page" and submit    | a complete set of fingerprints. <<                                      |  |  |  |  |  |  |  |
| <b>Co</b><br>8)        | ntact Information<br>Mailing Address for  | n:<br>or City Notices/License Certifica                         | ate Mailing: □ <b>Same a</b>             | s business address OR:  |  |  |  |  |  |  |  |
|                        |   | Street Address (inclu   | de Apt/Suite #), City, State & Zip Cod   | e   |  |  |  |  |  |  |  |
| 9)                     | Email Address fo  | r License Services Notices:                                     | print clearly; email will be used to com | municate important information about your application.                  |  |  |  |  |  |  |  |
| 10)                    | Business Ph. #: _   |   | ·  | 12) Business Fax #:   |  |  |  |  |  |  |  |
| -                      |   | pproved, I want to pay & pick-u                                 |  | ·   |  |  |  |  |  |  |  |
| Lic                    | ense Specific Ir  | nformation:   |  |   |  |  |  |  |  |  |  |
|                        | •   | ms being bought or sold:  |  |   |  |  |  |  |  |  |  |
|                        |   | ILY: DEPT RESPONSE DUE:   |  |   |  |  |  |  |  |  |  |
|                        |   |   |  | <br>Date:   |  |  |  |  |  |  |  |
|                        |   | risor: ☐ Approved ☐ Denied Signa                                |  |   |  |  |  |  |  |  |  |

Page 11 of 12

Account #: For staff use: Staff Initials:

|                   |                           |                             | API                     | PLICAT                       | ΓΙΟΝ - IN                             | IDIVID                       | UAL INF                     | ORMATIO               | ON PAG              | E              |             |               |  |
|-------------------|---------------------------|-----------------------------|-------------------------|------------------------------|---------------------------------------|------------------------------|-----------------------------|-----------------------|---------------------|----------------|-------------|---------------|--|
|                   |                           | oplicant                    |                         |                              |                                       |                              |                             |                       |                     |                |             |               |  |
|                   |                           |                             |                         |                              |                                       |                              |                             |                       |                     |                |             |               |  |
| 16) All           | otner na                  | ames use                    | a in pa                 | ast 5 yea                    | rs - Include                          | e any sno                    | rtened nam                  | nes or maide          | n names.            | if none        | , write     | NONE"         | <u>.                                    </u> |
| 17) Re            | sidentia                  | l Address                   | :                       |                              |                                       |                              |                             | #), City, State and   |                     |                |             |               |  |
|                   |                           |                             |                         |                              |                                       |                              |                             | #), City, State and   |                     |                |             |               |  |
| 19)Day            | /time Ph                  | none #:                     |                         |                              |                                       |                              | 20) Alterna                 | ative Phone           |                     |                |             |               |  |
| 21)Pla            | ce of Bi                  | rth:                        |                         |                              |                                       |                              | 22) Date o                  | f Birth:              |                     |                |             |               |  |
| 23) Ph            | ysical D                  | escription                  | n:                      |                              |                                       |                              |                             |                       |                     |                |             |               |  |
|                   | a) We                     | eight:                      |                         |                              |                                       |                              | b) Hair C                   | olor:                 |                     |                | _           |               |  |
|                   |                           | ight:                       |                         |                              |                                       |                              |                             | olor                  |                     |                |             |               |  |
| 24) Wh<br>Writter | nat type<br>oproof of age | of ID have<br>must be submi | e you  <br>tted with th | provided<br>nis application. | with this a                           | applicati<br>of includes pic | on?<br>ture driver license  | e or other current p  | hoto identification | on documen     | t issued by | a governme    | ental agency.                                |
| les elle el       | -ll A-                    | !:                          | Daal                    |                              | lf                                    | (!                           |                             |                       |                     |                |             |               |  |
|                   |                           |                             |                         |                              | Informatered a ple                    |                              | tv or "no c                 | ontest" to a          | ny crimin           | al offer       | ise?        |               |  |
| -                 | •                         |                             |                         |                              | · ·                                   | _                            | •                           | sposition:            | -                   |                |             |               |  |
|                   |                           | - ,                         | , ,                     |                              | , , , , , , , , , , , , , , , , , , , |                              | ,                           | _                     |                     |                |             | nal informa   | tion attached                                |
| 26) Ha            | ve vou e                  | ever had a                  | a busir                 | ness lice                    | nse denied                            | d. suspe                     | nded. or re                 | evoked?               |                     |                |             |               |  |
| •                 | res □                     |                             |                         |                              |                                       | •                            |                             | ison:                 |                     |                |             |               |  |
|                   |                           | ,                           |                         |                              |                                       |                              |                             |                       |                     |                | ☐ Addition  | nal informa   | tion attached                                |
| 27) Ha            | ve vou e                  | ever enter                  | red into                | o a Cons                     | ent Agree                             | ment wi                      | th the City                 | of Phoenix            | City Cler           | k Depa         | rtment      | ?             |  |
| •                 | yes □                     |                             |                         |                              | •                                     |                              | •                           | eement:               | •                   | •              |             |               |  |
| 1 404             | (NOW) F                   |                             |                         |                              | HOROUGH                               |                              |                             |                       |                     |                |             |               |  |
|                   |                           |                             |                         |                              | .0000                                 |                              |                             | MATION ITE            | F PHOEN<br>EMS 1-5  |                |             |               |  |
| COMF              | LETENI                    | ESS REVI                    | EW AN                   | ID SUBS                      | TANTIVE F                             | REVIEW                       | <b>PROCESS</b>              | ES) PRIOR             | TO SUBN             | <b>IITTING</b> | THIS        | <b>APPLIC</b> | CATION.                                      |
|                   |                           | CR DENII                    |                         | MY AP                        | PLICATION                             | N FEES                       | ARE NOT                     | RÉFUNDA               | BLE, EVE            | :N IF I        | HE AP       | PLICA         | ION IS                                       |
|                   |                           |                             |                         | E DED II I                   | ΙΟΥ ΤΠΑΤ Ι                            |                              | DEAD THE                    | FOREGOIN              | C VDDI IC           | 'ATION         | AND T       | . TV T        | I THE  |
|                   |                           |                             |                         |                              |                                       |                              |                             | CORRECT.              | O AI I LIC          | AIION          | AND I       | וואו או       |  |
| Printe            | d Applic                  | ant Name                    | e:                      |                              |                                       |                              | Signature:                  |                       |                     |                |             | Date: _       |  |
|                   |                           |                             |                         |                              | FOR STA                               | AFF USF O                    | NLY BELOW                   | THIS LINE             |                     |                |             |               |  |
| 7                 | Address                   | Annlination                 | \/al:al                 | Lawful                       | Fingerprint                           |                              |                             | Entities Only         | Payment             | TALIS          | S Check I   | nitials       | Intake                                       |
| Zoning<br>Check   | Check<br>(USPS)           | Application<br>Form         | Valid<br>ID             | Presence<br>ID               | Card<br>Received                      | Tax<br>License               | Articles of<br>Organization | AZ Corp<br>Commission |                     | Intake         | FC          | AA            | Staff<br>Initials                            |
|                   |                           |                             |                         |                              |                                       |                              |                             |                       |                     |                |             |               |  |
| Police !          | Dent Poo                  | ommondo                     | tion: 🗆                 | Approval                     | □ No Bosio                            | for Donic                    | I 🗆 Donial v                | //Memo Signa          | ature:              |                |             | Dato:         |  |
| ronce L           | љуг. <b>ке</b> с          | Jiiiiiellal                 | .iOii. ⊔                | Approval                     | IND DASIS                             | ioi Dellia                   | ı u Deilidi V               | www.nicitio Signi     | วเนเ <i>せ</i>       |                |             | Dale          |  |
| Meeting           | Training/                 | w/ Applican                 | t Compl                 | leted: □ Ye                  | es 🗆 No 🏻                             | ⊒ Previou                    | sly complete                | d □ N/A               |                     |                |             |               |  |

License Services Supervisor: ☐ Approved ☐ Denied Signature: \_\_\_\_\_

\_\_ Date:\_\_