ARIZONA JOINT TAX APPLICATION (JT-1)



License and Registration ARIZONA DEPARTMENT OF REVENUE

PO BOX 29032 Phoenix, AZ 85038-9032 IMPORTANT! Incomplete applications WILL NOT BE PROCESSED.

- Please read form instructions while completing the application.
 Additional information and forms available at www.azdor.gov
- Required information is designated with an asterisk (*).
- Return completed application AND applicable license fee(s) to address shown at left.
- For licensing questions regarding transaction privilege tax, call Customer Care and Outreach: (602) 255-3381

You can register, file and pay for this application online at www.AZTaxes.gov. It is fast and secure.

CECTION As Ducinosa Información							
SECTION A: Business Information	o* Lieones Tu	pe – Check all th	of annly				
1* Federal Employer Identification Number or Social Security Number, required if sole proprieto	r			_			
with no employees	l <u>—</u>	ction Privilege Ta	` '	=	Use Tax		
			ent Tax (if hiring employees	,			
3* Type of Organization/Ownership – Tax exempt	<u> </u>		_	_			
Individual/Sole Proprietorship	Subchapter S Corpor	ration	Government	=	Joint Venture		
☐ Corporation	Association		Estate	Ц	Receivership		
State of Inc.	☐ Partnership		☐ Trust				
Date of Inc. M,M,D,D,Y,Y,Y,Y,	Limited Liability Com	pany	Limited Liability P	artnership			
4* Legal Business Name							
5* Mailing Address – number and street		City		State	ZIP Code		
		ļ					
County/Region		Country					
6* Business Phone No. (with area code) 7 Email	l Address			8 Fax Numbe	(with area code)		
9* Description of Business: Describe merchandise	sold or taxable activity.						
10* NAICS Codes: Available at www.azdor.gov							
11* Did you acquire or change the legal form of an e	existing business?	12* Are you a co	onstruction contractor?				
□ No □ Yes → You must complete Section F.		□ No □	Yes (see bonding requiremen	nts)			
BONDING REQUIREMENTS: Prior to the issuance of Contractors unless the contractor qualifies for an exempto be posted. Bonds may also be required from applicate Bonds, available online at www.azdor.gov or in Arizona	tion from the bonding requirer	k license, new or o ment. The primary to ng Arizona taxes or	ut-of-state contractors are	e required to post	a Taxpayer Bond for es the amount of bond publication, Taxpayer		
	WITHHOLDING	LICENSE ON	ILY				
13* Withholding Physical Location Number and street (<u>Do not</u> use PO Box, PMB or route	e numbers)	City		State	ZIP Code		
		1					
County/Region		Country					
		1		Со	ntinued on page 2 🗲		

	FOR AGENCY I	JSE ONLY	CASHIER'S STAMP ONLY. DO NOT MARK IN THIS AREA.
	ACCOUNT NUMBER	DLN	
□ New			
☐ New	START	TRANSACTION PRIVILEGE TAX	
☐ Change			
- Change	S/E DATE	WITHHOLDING / SSN / EIN	
Revise			
L INEVISE	COMPLETED DATE	EMPLOYEE'S NAME	
Reopen			
- Reopen	LIABILITY	LIABILITY ESTABLISHED	

T-1/U Name	C-001 (12/17) (as shown on page 1)						FEIN or S	SSN (as sho	wn on page	1)	
SEC	CTION B: Identifica or Officia	ation of Ow als of this E		•	te Offic	ers Membe	ers/Man	aging M	embers		
partne	need more space, attach A ers or corporate officers, men ned and unemployment insu	dditional Owner, mbers and/or ma	Partner, Corpora	ate Officer(s) form a s own more than 50°	% of or cor	trol another busin	ness in Ariz	ona, attach a	a list of the bu	usiness	ses, percentages
OW	*Social Security No.	*Title	unibers of provid	e a Fower of Attorne	*Last N			First Name		260 CO	Middle Intl.
Owner 1	*Street Address				*City				*State	* %	Owned
Ó	*ZIP Code	*County			*Phone	Number (with a	area code)	*Country			
	*Social Security No.	*Title			*Last N	ame		First Name			Middle Intl.
Owner 2	*Street Address				*City				*State	* %	Owned
ó	*ZIP Code	*County			*Phone	Number (with a	area code)	*Country	<u> </u>		
	*Social Security No.	*Title			*Last N	ame		First Name	•		Middle Intl.
Owner 3	*Street Address				*City				*State	* %	Owned
ò	*ZIP Code	*County			*Phone	Number (with a	area code)	*Country			
SEC	TION C: Transact	ion Priviled	ie Tax (TPT	')				<u>'</u>	1		
4 F	Date Business Started in A.M.D.D.Y.Y.Y.Y.Y. Giling Frequency	ithly Quart	terly Seas	Y, Y, Y	If sea	sonal filer, chec JG SEP 7 Does your	ck the moi	nths for wh	ich you inte	end to	
	☐ Yes → ☐ Retailer O		or	Cash Receipt Accrual	ots						
	ax Records Physical Loc Do not use PO Box, PMB or route		r and street		City				State	Z	IP Code
Cour	nty				Country						
9* N	lame of Contact				* Phone Number (with area code) Extension						
SEC	CTION D: Transact	ion Privileg	je Tax (TPT) Physical Lo	cation						
	Business Name, "Doing B							2* F	Phone Num	nber (v	vith area code)
3* Physical Location of Business or Commercial/Residential Rental Number and street (<u>Do not</u> use PO Box, PMB or route numbers)					City			,	State	Z	IP Code
County/Region				Country							
Resid	dential Rental Only – Nur	mber of Units			Reportin	g City (if differe	ent than th	e physical	location cit	y)	
4 * A	additional County/Region	Indian Reserva	ation/City: Co	unty/Region India	n Reserv	ation and City 0	Codes ava	nilable at w	ww.azdor.g	JOV	
	ounty/ egion				Cit	y					
Е	Business Codes (Include	all codes that a	apply): S	ee instructions. (Complete	list available at	t www.azd	or.gov			
C	State/ ountv				Cit	v					

If you have more locations, attach Additional Business Locations form available at www.azdor.gov

	I/UC-001 (12/17)						
Na	me (as shown on page 1)			FEIN or SSN ((as shown on page 1)		
SE	ECTION E: Withholding & Unemploy	vment Tay Annlican	ıte				
	Regarding THIS application, Date Employees			for Federal Unemplo	nyment Tax?		
'	M,MID,DIY,Y,Y,Y	riist illed ili Alizolia		st year of liability:			
3	Are individuals performing services that are ex	cluded from withholding	4 Do you have a Federal Unem	n IRS ruling that gra	ants an exclusion fr	om	
	or unemployment tax? ☐ Yes → Describe services:			ployment tax? tach a copy of the R	ulina l etter		
	L 165 2 Bessinse services.		2 100 2 7111	aon a copy of the re	umig Letter.		
5	Do you have, or have you previously had, an A	Arizona unemployment tax	number?				
	□ No				Unemployment	: Tax Number:	
6	☐ Yes → Business Name:		Hired Year	Hired Quarter	Paid Year	Paid Quarter	
Ĭ	(indicate quarter as 1, 2, 3, 4):	Y,Y,Y,Y	Tilled Quarter	Y, Y, Y, Y	Faid Quarter		
7	When did/will you first pay a total of \$1,500 or		Q	Year	Quarter		
	(indicate quarter as 1, 2, 3, 4)		4/ \/O\ N	Y, Y, Y, Y	0		
a	Exceptions: \$20,000 gross cash wages Agricultural; \$1,000 grown When did/will you first reach the 20th week of each the 20th the			Year	Quarter		
	each of 20 different weeks in the same calendary	ar year? (indicate quarter as	1, 2, 3, 4)	j		Quartor	
Exceptions: 10 or more individuals Agricultural; 4 or more individuals 501(c)(3) Non-Profit; not applicable to Domestic/Household.					Y,Y,Y,Y	Q	
	ECTION F: Acquired Business Infor						
	you answered "Yes" to Section A, ques						
1*	Did you acquire or change all or part of an exis	sting business?	2* Date of Acquis	sition 3* EIN	of Business Under	Previous Owner	
	☐ All ☐ Part		M,MID,DIY,	Y.Y.Y			
4*		5* Name of Business Un			e of Previous Owne	r	
7*		the Arizona operations of	8* Date of Chan	ge 9 * FIN o	of Previous Legal Fo	orm	
,	your existing business? (e.g., change from sole pr	roprietor to corporation or etc.		ge J Envo	n i revious Legar i v	51111	
	☐ Part		$M_1M_1D_1D_1Y_1$	YYY			
SE	ECTION G: AZTaxes.gov Security A	dministrator					
	it www.AZTaxes.gov (the Arizona Department of		er service center) to	o register for online	services. The autho	rized individual will	
hav	e full online access to transaction privilege, use	, withholding and corporat	te tax account inforr	mation and services	. The authorized in	dividual will be able	
	add or delete users and grant user privileges. On a Self-Select Personal Identification Number (nformation, filing tax	returns, signing re	turns electronically	
	,	int and remitting tax pay	monts.				
	ECTION H: Required Signatures						
	is application must be signed by either a sole ov stee or receiver or representative of an estate th			er or corporate office	r legally responsibl	e for the business,	
1 F	rint or Type Name		2 Print or Type Na	me			
Titl	e		Title				
	•						
Da	te		Date				
_							
Sig	gnature		Signature				

This application must be completed, signed, and returned as provided by A.R.S. § 23-722.

Equal Opportunity Employer/Program

This application is available in alternative formats at Unemployment Insurance Tax Office.

PLEASE COMPLETE SECTION I: STATE/COUNTY & CITY LICENSE FEE WORKSHEET TO CALCULATE AND REMIT TOTAL AMOUNT DUE WITH THIS APPLICATION.

SECTION I: State/County & City License Fee Worksheet

ALL FEES ARE SUBJECT TO CHANGE. Check for updates at www.azdor.gov.

To calculate CITY FEE: Multiply No. of Locations by the License Fee and enter sum in License Subtotal.

City/Town			License	License Subtotal	City/Town		No. of Loc's	License Fee	License Subtotal	City/Town		No. of Loc's	License Fee	License Subtotal
Apache Junction	AJ		\$2.00		Goodyear	GY		\$5.00		Sahuarita	SA		\$5.00	
Avondale	AV		\$0.00		Guadalupe	GU		\$2.00		San Luis	SU		\$2.00	
Benson	BS		\$5.00		Hayden	HY		\$5.00		Scottsdale	sc		\$50.00	
Bisbee	ВВ		\$1.00		Holbrook	НВ		\$1.00		Sedona	SE		\$2.00	
Buckeye	BE		\$2.00		Huachuca City	НС		\$2.00		Show Low	SL		\$2.00	
Bullhead City	ВН		\$2.00		Jerome	JO		\$2.00		Sierra Vista	SR		\$1.00	
Camp Verde	CE		\$2.00		Kearny	KN		\$2.00		Snowflake	SN		\$2.00	
Carefree	CA		\$10.00		Kingman	KM		\$2.00		Somerton	so		\$2.00	
Casa Grande	CG		\$2.00		Lake Havasu	LH		\$5.00		South Tucson	ST		\$2.00	
Cave Creek	CK		\$20.00		Litchfield Park	LP		\$2.00		Springerville	SV		\$5.00	
Chandler	СН		\$2.00		Mammoth	МН		\$2.00		St. Johns	SJ		\$2.00	
Chino Valley	CV		\$2.00		Marana	MA		\$5.00		Star Valley	SY		\$2.00	
Clarkdale	CD		\$2.00		Maricopa	MP		\$2.00		Superior	SI		\$2.00	
Clifton	CF		\$2.00		Mesa	ME		\$20.00		Surprise	SP		\$10.00	
Colorado City	CC		\$2.00		Miami	MM		\$2.00		Taylor	TL		\$2.00	
Coolidge	CL		\$2.00		Nogales	NO		\$0.00		Tempe	TE		\$50.00	
Cottonwood	CW		\$2.00		Oro Valley	OR		\$12.00		Thatcher	TC		\$2.00	
Dewey/Humboldt	DH		\$2.00		Page	PG		\$2.00		Tolleson	TN		\$2.00	
Douglas	DL		\$5.00		Paradise Valley	PV		\$2.00		Tombstone	TS		\$1.00	
Duncan	DC		\$2.00		Parker	PK		\$2.00		Tucson	TU		\$20.00	
Eagar	EG		\$10.00		Patagonia	PA		\$0.00		Tusayan	TY		\$2.00	
El Mirage	EM		\$15.00		Payson	PS		\$2.00		Wellton	WT		\$2.00	
Eloy	EL		\$10.00		Peoria	PE		\$50.00		Wickenburg	WB		\$2.00	
Flagstaff	FS		\$20.00		Phoenix**	PX		\$50.00		Willcox	WC		\$1.00	
Florence	FL		\$2.00		Pima	PM		\$2.00		Williams	WL		\$2.00	
Fountain Hills	FH		\$2.00		Pinetop/Lakeside	PP		\$2.00		Winkelman	WM		\$2.00	
Fredonia	FD		\$10.00		Prescott	PR		\$5.00		Winslow	WS		\$10.00	
Gila Bend	GI		\$2.00		Prescott Valley	PL		\$2.00		Youngtown	YT		\$10.00	
Gilbert	GB		\$2.00		Quartzsite	QZ		\$2.00		Yuma	YM		\$2.00	
Glendale	GE		\$35.00		Queen Creek	QC		\$2.00						
Globe	GL		\$2.00		Safford	SF		\$2.00						I
Subtotal City License Fees (column 1) \$					Subtotal City License Fees (column 2) \$			Subtotal City License Fees (column 3) \$						

AA TOTAL City License Fee(s) (column 1 + 2 + 3).....

Fee per No. of Loc's **TOTAL** Location BB TOTAL State License Fee(s): Calculate by multiplying number of business locations by \$12.00 \$12.00 \$ Residential Rental License Fees - Only Chandler, Phoenix, and Scottsdale **City Fee** Multiply the number of units per locations by \$2.00 (\$50.00 Annual Cap per license). No. of Units No. of Loc's \$ Residential Rental License-Chandler **ONLY CHANDLER, PHOENIX, and SCOTTSDALE** should use this section. \$ Residential Rental License-Phoenix DO NOT use the fee chart above to calculate license fees. The amount for each city CANNOT EXCEED \$50.00 \$ Residential Rental License-Scottsdale

CC TOTAL City Residential Rental License Fees (Add Chandler, Phoenix, & Scottsdale).....

DD TOTAL DUE (Add lines AA + BB + CC) Make check payable to Arizona Department of

- Revenue.
- Include FEIN or SSN on payment.

- Do not send cash.
- · License will not be issued without full payment of fee(s).

\$

^{**}If your only business is under Class 213, Commercial Lease, there is no license fee due.



ARIZONA DEPARTMENT OF REVENUE GENERAL INSTRUCTIONS FOR ARIZONA JOINT TAX APPLICATION (JT-1)

Online Application

Go to www.AZTaxes.gov

Notice for Construction Contractors: Due to bonding requirements, construction contractors are not permitted to license for transaction privilege tax online. For more information, please contact us.

Mailing Address

Arizona Department of Revenue PO Box 29032 Phoenix, AZ 85038-9032

Customer Service Center Locations

8:00 a.m. - 5:00 p.m. Monday through Friday (except Arizona holidays)

Phoenix Office

1600 W Monroe Phoenix, AZ 85007

Tucson Office

400 W Congress Tucson, AZ 85701

7:00 a.m. - 6:00 p.m.

Monday through Thursday
8:00 a.m. - 12:00 p.m.

Friday
(except Arizona holidays)

Mesa Office

55 N Center Mesa, AZ 85201

(This office does not handle billing or account disputes.)

Customer Service Telephone Numbers

Licensing for TPT, Withholding or Use Tax (Arizona Department of Revenue) (602) 255-3381

> Unemployment Tax (Arizona Department of Economic Security) (602) 771-6602

E-mail: uitstatus@azdes.gov

The Arizona Joint Tax Application (JT-1) is used to apply for Transaction Privilege Tax, Use Tax, and Employer Withholding and Unemployment Insurance. The Application is called "Joint" because it is used by both the Department of Revenue and Economic Security.

USE THIS APPLICATION TO:

- License New Business: If you are selling a product or engaging in a service subject to transaction privilege tax, you will most likely need to obtain the state transaction privilege tax license (TPT) license.
- Change Ownership: If acquiring or succeeding to all or part of an existing business or changing the legal form of your business (sole proprietorship to corporation, etc.).

IMPORTANT: To avoid delays in processing of your application, we recommend you read these instructions and refer to them as needed to ensure you have accurately entered all the required information. This application must be completed, signed, and returned as provided by A.R.S. § 23-722.

- Please read form instructions while completing the application. Additional information and forms are available at www.azdor.gov.
- Required information is designated with an asterisk (*).
- Please complete Section I: State/County & City License Fee Worksheet to calculate and remit Total Amount Due with this application.

When completing this form, please **print or type in black ink**. Legible applications are required for accurate processing. The following numbered instructions correspond to the numbers on the Form JT-1.

If you need to update a license, add a business location, get a copy of your license, or make other changes: Complete a Business Account Update form and include a State fee of \$12 per location and any applicable fees related to locations within the City/Town jurisdictions. Additional information and forms are available at www.azdor.gov.

Section A: BUSINESS INFORMATION

1. Provide your Federal Employer Identification No. (FEIN) or Social Security No. (SSN) if you are a sole proprietor without employees. Taxpayers are required to provide their taxpayer identification number (TIN) on all returns and documents. A TIN is defined as the federal employer identification number (EIN) or SSN, depending upon how income tax is reported. The EIN is required for all employers. A penalty of \$5 will be assessed by the Department of Revenue for each document filed without a TIN.

2. License Type (Check all that apply):

Transaction Privilege Tax (TPT): Anyone engaged in a business taxable under the TPT statutes must apply for a TPT License before engaging in business. For TPT, you are required to obtain and display a separate license certificate for each business or rental location. This may be accomplished in one of the following ways:

- Each location may be licensed as a separate business with a separate license number for purposes of reporting transaction privilege and use taxes individually. Therefore, a separate application is needed for each location.
- Multiple locations may be licensed under a consolidated license number, provided the ownership is the same, to allow filing of a single tax return. If applying for a new license, list the various business locations as instructed below. If already licensed and you are adding locations, do not use this application to consolidate an existing license. Please submit a Business Account Update form, available at www.azdor.gov.

Withholding & Unemployment Taxes: Employers paying wages or salaries to employees for services performed in the State must apply for a Withholding number & Unemployment number.

Use Tax: Out-of-state vendors (that is, vendors with no Arizona location) making direct sales into Arizona must obtain a Use Tax Registration Certificate. In-state business not required to be licensed in Arizona for TPT purposes, making out-of state purchases for their own use (and not for resale) must also obtain the Use Tax registration.

TPT for cities only: This type of license is needed if your business activity is subject to city TPT which is collected by the state, but the activity is not taxed at the state level.

- **3. Type of Organization/Ownership:** Check as applicable. A corporation must provide the state and date of incorporation.
- **4.** Provide the **Legal Business Name** or owner or corporation as listed in its articles of incorporation, or individual and spouse, or partners, or organization owning or controlling the business.
- 5. Provide the **Mailing Address** (number and street) where all correspondence is to be sent. You may use your

home address, corporate headquarters, or accounting firm's address, etc. If mailing address differs for licenses (for instance withholding and unemployment insurance), please send a cover letter with completed application to explain.

- Provide the Business Phone Number including the area code.
- Provide the Email Address for the business or contact person.
- Provide the Business Fax Number including the area code.
- 9. Provide the Description of Business by describing the major taxable business activity, principle product you manufacture, commodity sold, or services performed. Your description of business is very important and MUST link to the appropriate NAICS Code and Business Code.
- 10. Provide all North American Industries Classification System (NAICS) Code(s) that apply. The NAICS is identified for your business, based on your major business activity, principle product you manufacture, commodity sold, or services performed. You must indicate at least one NAICS code. A current listing is available at www.azdor.gov.
- **11.** If you acquired or changed the legal name of an existing business, you must complete Section F of this application. If you check NO, proceed to number 12.
- **12.** If you are a construction contractor, read bonding requirements and submit the appropriate bonding paperwork with this application. If you check NO, proceed to number 13.
- **13.** Provide the **Withholding Physical Location** of the business. This address cannot be a PO Box or Route Number.

Section B: IDENTIFICATION OF OWNERS, PARTNERS, CORPORATE OFFICERS, MEMBERS/ MANAGING MEMBERS OR OFFICIALS OF THIS EMPLOYING UNIT

Provide the full name, social security number and title of all Owners, Partners, Corporate Officers, Members/ Managing Members or Officials of the Employing Unit. If you need additional space, attach Additional Owners, Partners, Corporate Officer(s) Addendum available at www.azdor.gov. If the owner, partners, corporate officers or combination of partners or corporate officers, members and/ or managing members own more than 50% of, or control another business in Arizona, attach a list of the businesses, percentages owned and unemployment insurance account numbers or provide a General Disclosure/ Power of Attorney (Form 285) which must be filled out and signed by an authorized corporate officer.

Section C: TRANSACTION PRIVILEGE TAX (TPT)

- 1. Provide the Date Business Started in Arizona.
- 2. Provide the **Date Sales Began** in Arizona or estimate when you plan to begin selling in Arizona.
- 3. Tax Liability: Provide the amount of gross income you can reasonably expect to generate in your first twelve months of business. You will be set up for monthly filing unless your Estimated Tax Liability will result in a tax liability of less than \$8,000, which will require you to file quarterly.
- **4.** Based on your tax liability, provide your filing frequency. If your total estimated annual combined Arizona, county and municipal TPT liability is:
 - Less than \$2,000, you may file and pay annually.
 - Between \$2,000 and \$8,000, you may file and pay quarterly.
 - Otherwise, your transaction privilege taxes are due monthly.

If your business is **Seasonal** or you are a transient **vendor**, indicate the months in which you intend to do business in Arizona.

- **5.** Indicate whether your business sells **tobacco products.** If you checked yes, check the box to indicate if you are a retailer or distributor of tobacco products.
- 6. TPT Filing Method: Check which filing method your business uses for determining tax liability. Cash basis requires the payment of tax based on sales receipts actually received during the period covered on the tax return. When filing under the accrual basis the tax is calculated on the sales billed rather than actual receipts.
- 7. If you sell new Motor Vehicle Tires or Vehicles, you must file the Motor Vehicle Waste Tire Fee form (TR-1) available at www.azdor.gov. Sellers of new motor vehicles and motor vehicle tires in the state, for on-road use, are required to report and pay a waste tire fee to the Department of Revenue.
- **8.** through 9. **Tax Records Physical Location** indicate the physical address where your tax records are located. Include the contact person's name and phone number.

Section D: TRANSACTION PRIVILEGE TAX (TPT) PHYSICAL LOCATION

- Provide the Business Name, "Doing Business As" (DBA). DBA is the name of a business other than the owner's name or, in the case of a corporation, a name that is different from the legal or true corporate name. If it is the same as the Legal Business Name enter "same".
- 2. Provide the **Business Phone Number** including the area code.
- Provide the Physical Location of the business. This address cannot be a PO Box or Route Number. Provide:
 - County/Region
 - Residential Rentals ONLY Number of Units
 - Reporting City, if different from the Physical Location city. For example, if the location for the listed address

- is listed in an adjacent city, such as Scottsdale, but the location of the business is actually within the city of Phoenix. See "TPT Rate Look Up" on www.AZTaxes.gov.
- Provide if your business is located on an Indian Reservation; provide the Additional County/Region Indian Reservation Code(s). A current listing is available at www.azdor.gov.

Provide the **Business Code(s)** including all State and City Business Code(s) that apply; based on your major business activity, principle product you manufacture, commodity sold, or services performed. You must indicate at least one business code. A current listing is available at www.azdor.gov.

If you have more locations, attach Additional Business Locations form available at www.azdor.gov.

Section E: WITHHOLDING & UNEMPLOYMENT TAX APPLICANTS

- 1. Provide the **Date Employees First Hired** in Arizona.
- **2.** If you are liable for Federal Unemployment Tax, check YES and enter the first year of liability.
- **3.** If individuals in your business are performing services that are excluded from withholding or unemployment tax, check YES and describe the services these individuals are performing.
- 4. If your business has an IRS ruling that grants an exclusion from Federal Unemployment Tax, check YES and you must attach a copy of the Ruling Letter to this application.
- **5.** If you have, or previously had an Arizona unemployment tax number, check YES and provider the business name you used and the unemployment number.
- **6.** Provide the first calendar quarter Arizona employees were or will be hired and paid.
- 7. When do you anticipate or did you first pay a total of \$1,500 or more in gross wages in a calendar quarter? Indicate the year and quarter in which this occurred or will occur.
- **8.** When do you anticipate or did you first reach the 20th week of employing 1 or more individuals for a full or partial day within the same calendar year? Indicate the year and guarter in which this occurred or will occur.

Section F: ACQUIRED BUSINESS INFORMATION

1. Did you acquire or change all or part of an existing business? If part, to obtain an unemployment tax rate based on the business's previous account, you must request it no later than 180 days after the date of acquisition or legal form of business change; contact the Unemployment Tax Office Experience Rating Unit for an Application & Agreement for Severable Portion Experience Rating Transfer (form UC-247; printable version available online at www.azui.com).

- **2.** Provide the date you acquired the previous owner's business or changed the legal form of your existing business (sole proprietor to corporate, etc.).
- **3.** through 6. Complete as indicated if you know the previous owner's information.
- 7. through 9. If you merely changed the legal form of your existing business, indicate whether or not you changed all or part of the business, the date of change and EIN of previous Legal Form of Business.

SectionG: AZTAXES.GOVSECURITYADMINISTRATOR

Visit www.AZTaxes.gov (the Arizona Department of Revenue's online customer service center) to register for online services. The authorized individual will have full online access to transaction privilege, use, withholding and corporate tax account information and services. The authorized individual will be able to add or delete users and grant user privileges. Online services include viewing tax account information, filing tax returns, signing returns electronically with a Self-Select Personal Identification Number (PIN) and remitting tax payments.

Section H: REQUIRED SIGNATURES

This application must be signed only by either a sole owner, at least two partners, managing member or corporate officer legally responsible for the business. This application CANNOT be signed by agents or representatives.

Section I: STATE/COUNTY & CITY LICENSE FEE WORKSHEET

There are no fees for Withholding/Unemployment Insurance, or Use Tax registrations. State license fees are calculated per business location. To calculate the city license fees, use the listing of cities on page 4, Section I of this application. City fees are subject to change. Check for updates at www.azdor.gov.

- AA: TOTAL City License Fees To calculate the city fees, multiply No. of Locations in the city by the license fee and enter sum in Subtotal City License Fees. Then calculate and enter the sum of columns 1 + 2 + 3. If you have a location in Phoenix and the business is only under Class 213, Commercial Lease, there is no license fee due.
- BB: TOTAL State License Fees To calculate the state fees, multiply the No. of locations in the state by \$12.
- CC: TOTAL City Residential Rental License Fee USE THIS SECTION FOR CHANDLER, PHOENIX AND SCOTTSDALE ONLY. These cities WILL NOT use the larger fee chart. To calculate Residential Rental license fee, multiple the No. of units by the No. of locations by \$2.00 (\$50.00 Annual Cap per license). The amount for each city CANNOT EXCEED \$50.00.
- DD: TOTAL DUE Add lines AA + BB + CC.

Please send your payment for this amount. Failure to include your payment with this application will result in a delay in processing your license. Licenses are not issued until all fees have been paid.

Make checks payable to the Arizona Department of Revenue. Be sure to return all pages of the application with your payment. Retain a copy of the application for your records.

- DO NOT SEND CASH
- Include your EIN or SSN on payment

State/Co	State/County Business Codes									
Codes	Taxable Activities	Codes	Taxable Activities	Codes	Taxable Activities					
002	Mining - Nonmetal	014	Personal Property Rental	051	Jet Fuel Use Tax					
004	Utilities	015	Contracting - Prime	053/055	Rental Car Surcharge					
005	Communications	017	Retail	129	Use Tax Direct Payments					
006	Transporting	019	Severance -Metalliferous Mining	153	Rental Car Surcharge - Stadium					
007	Private (Rail) Car	023	Recreational Vehicle Surcharge	315	MRRA Amount					
008	Pipeline	025	Transient Lodging	911	911 Telecommunications					
009	Publication	029	Use Tax Purchases	912	E911 Prepaid Wireless					
010	Job Printing	030	Use Tax from Inventory							
011	Restaurants and Bars	033	Telecommunications Devices							
012	Amusement	041	Municipal Water							
013	Commercial Lease	049	Jet Fuel Tax							

City Business Codes									
Codes	Taxable Activities	Codes	Taxable Activities	Codes	Taxable Activities				
004	Utilities	020	Timbering & Other Extraction	116	Feed Wholesale				
005	Communications	027	Manufactured Buildings	144	Hotel/Motel (additional tax)				
006	Transporting	029	Use Tax	213	Commercial Rental, Licensing for Use				
009	Publication	030	Use Tax from Inventory	214	Rental, Leasing and Licensing for Use of Tangible Personal Property				
010	Job Printing	037	Contracting - Owner Builder	244	Lodging-Extended Stay				
011	Restaurants and Bars	040	Rental Occupancy	313	Commercial Lease (additional tax)				
012	Amusement	044	Hotels	315	MRRA Amount				
015	Contracting - Prime	045	Rental Residential						
016	Contracting Spec Builder	049	Jet Fuel Tax						
017	Retail	051	Jet Fuel Use						
018	Advertising	062	Retail Sales Food for Home Consumption						
019	Severance - Metalliferous Mining	111	Additional Restaurants & Bars						