ALARM BUSINESS APPLICATION

City of Scottsdale
7447 E. Indian School Rd. Ste. 110
Scottsdale, AZ 85251
(480) 312-2400 www.ScottsdaleAZ.gov

Office Use Only

License # _____

Fee $ _____

PLEASE CHECK ONE:

PRIMARY ☐	RECIPROCAL ☐
Initial $200.00	Initial $75.00
Renewal $40.00	Renewal $20.00

City TPS License Number: _____

1. Business Name: _____

   Legal Business Name (if different): _____

2. Business Address: _____

   City: _____ State: _____ Zip Code: _____

3. Mailing Address (if different than above): _____

   City: _____ State: _____ Zip Code: _____

4. Business Phone: ( ) _____ - _____ Other Phone: ( ) _____ - _____ E-Mail: _____

5. Ownership: Individual: ____ General Partnership:____ Limited Partnership :____Corporation: ____LLC: _____

   Date of Incorporation: _____ State Incorporated: _____ Effective Date in Scottsdale: _____

6. If the business is a publicly traded corporation, please designate a controlling person residing in Arizona to act as responsible managing officer. This person will be the main point of contact between the alarm business and the City.

   Name (print): _____ Phone: ( ) _____- _____

7. Applicant Information (use additional paper if necessary):

   * Last Name: _____ First Name: _____ Middle Name: _____

   Residential Address: _____

   City: _____ State: _____ Zip Code: _____ Phone: ( ) _____ - _____

   Date of Birth: _____ Title: _____ Driver's License #: _____

   * Last Name: _____ First Name: _____ Middle Name: _____

   Residential Address: _____

   City: _____ State: _____ Zip Code: _____ Phone: ( ) _____ - _____

   Date of Birth: _____ Title: _____ Driver's License #: _____

* Each Applicant listed will need to complete an Alarm Business license supplemental form.

8. Have you or anyone listed for your business ever possessed a similar license that has been refused, denied, canceled, suspended or revoked within the past 5 years? Yes _____ No _____

If "Yes", please list the reason(s) for such action, along with the date and jurisdiction:

Reason: _____

Date: _____ Jurisdiction: _____

9. Have you or anyone listed for your business ever been convicted of any crime (except for minor traffic offense) in the past five (5) years? Yes _____ No _____

If "Yes", please list the reason(s) for such action, along with the date and jurisdiction:

Reason: _____

Date: _____ Jurisdiction: _____

10. If this is for a reciprocal Alarm Business License, please indicate the city in which the primary license is held:

City: _____ License #: _____

Date Issued: _____ Date of Expiration: _____

I HEREBY CERTIFY THAT ALL ANSWERS TO QUESTIONS ON THIS APPLICATION ARE TRUE AND COMPLETE, AND I AGREE AND UNDERSTAND THAT ANY FALSIFICATION OF MATERIAL FACTS MAY CAUSE FORFEITURE ON MY PART OF ALL RIGHTS TO, AND CONSIDERATION TO BE LICENSED IN THE CITY OF SCOTTSDALE.

Applicant Signature: _____ Date:_____

STAFF USE ONLY
(please initial and date the proper lines)

Agent List:	Proof of Age:	Proof of Citizenship:	Date:	Photo Taken by:	Prints Taken by:	Date:
_____	_____	_____	_____	_____	_____	_____

Location List:	ROC Lic:	FM or UL Listing:	Copy of Primary Lic:	City TPS Lic:	Ordinance Books:	Date:
_____	_____	_____	_____	_____	_____	_____

License Number: _____

LOCATIONS OF BUSINESS ACTIVITY IN ARIZONA

Please check the cities or towns in Arizona, where your business activity is taking place. This list is to ensure you do not perform unnecessary licensing under the reciprocal licensing program within the state of Arizona.

Arizona Reciprocal Jurisdictions (Please check all that apply):

_____ Chandler _____ Mesa

_____ Phoenix _____ Tucson

Other Jurisdictions (Please check all that apply):

_____ Apache Junction	_____ Douglas	_____ Kerney	_____ Prescott Valley
_____ Avondale	_____ Duncan	_____ Kingman	_____ Queen Creek
_____ Benson	_____ El Mirage	_____ Lake Havasu City	_____ Sedona
_____ Bisbee	_____ Eloy	_____ Litchfield Park	_____ Show Low
_____ Black Canyon City	_____ Flagstaff	_____ Maricopa	_____ Sierra Vista
_____ Buckeye	_____ Florence	_____ Miami	_____ Sun City
_____ Bullhead City	_____ Fountain Hills	_____ Nogales	_____ Sun Lakes
_____ Carefree	_____ Gila Bend	_____ Oro Valley	_____ Superior
_____ Casa Grande	_____ Gilbert	_____ Page	_____ Surprise
_____ Cave Creek	_____ Glendale	_____ Paradise Valley	_____ Tempe
_____ Clifton	_____ Globe	_____ Payson	_____ Tollenson
_____ Colorado City	_____ Goodyear	_____ Peoria	_____ Tonapah
_____ Coolidge	_____ Guadalupe	_____ Pinetop-Lakeside	_____ Wickenburg
_____ Cottonwood	_____ Holbrook	_____ Prescott	_____ Youngtown

_____ OTHER(S): _____

Applicant Signature: _____ Date: _____

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