

GENERAL INFORMATION

Anyone engaged in business activity on the Gila River Indian Community must apply for, and be issued a business license.

They must also comply with all laws and regulations of the Gila River Indian Community

Annual Business License shall be issued for a period of one year from date of approval.

Special Event Business License shall be issued for a period of 5 days. **Only one special event business license will be issued within a 12 month period.**

Applicants in the construction contracting business are required to provide a Certificate of Liability (listing GRIC as additional insured)

If any other ordinance or law of the Gila River Indian Community requires the business obtain a license or permit for **regulatory purposes**, no business license will be issued until the regulatory license or permit is obtained.

All vendors that offer or sell food must provide a copy of their GRIC Environmental Services' establishment Permit or Notice with their Business License Application.

A separate license is required for each physical location or business office.

Business licenses may be revoked after notice and hearing for any of the following: (this is not meant to be an all inclusive list)

- *Fraud or misrepresentation
- *Violation of Title 13 Ordinance or any other Community Law or Ordinance.
- *Conviction of a crime
- *Conducting business in an unlawful manner
- *Unfair business practices

Business license payments can be made ONLY by cash, check, cashier's check or money order and submitted to:
Gila River Indian Community
Office of the Treasurer
P.O. Box 2160
Sacaton, AZ 85147
(520) 562-9558

I. TYPE OF APPLICATION AND LICENSE.

(Select one of the following)

New: A new business with no previous owners.

Change: The purchasing of an existing business or changing a business entity (sole owner to corporation, etc.)

Renewal: To renew an existing annual license.

Update: To renew an existing permanent license.

Include applicable GRIC Member Number or Special Event Start Date

II. TYPE OF OWNERSHIP

Check applicable.

If you are a not-for-profit organization, attach a copy of your IRS determination letter.

If you are incorporated enter the state in which you are incorporated and date of incorporation.

III. BUSINESS INFORMATION

Legal Business Name:

Individual-Last, First (name of owner)

Partnership-Names of General

Partner/Owner

LLC-Managing Member per State

Regulation

Corporation-Name as listed in Articles of incorporation.

Enter the entities Federal Employer

Identification Number (EIN) or owner's

Social Security Number.

Enter the name under which the entity is

doing business (DBA). For example

"XYZ Foods".

Enter the name and email address of a contact person at the business.

Enter the street address of the primary location of business.

Enter a business contact phone number.

If different than the Business Address, enter the mailing address where all correspondence is to be sent including the monthly tax return. You may use your home address, corporate headquarters, or accounting firm's address.

If you wish correspondence sent to a name other than the Legal Business Name, enter the name or the department or accounting firm in the "In care of" section.

If your business is located on the Gila River Indian Community, check box.

Describe the major business activity: principal product you manufacture commodity sold, or services performed. A detailed description of the business is very important because it determines your taxability.

Enter the location of where you will be conducting business on the Gila River Indian Community.

Enter the date business started on the Gila River Indian Community.

If applicable enter the date sales on the Gila River Indian Community began.

Enter the estimated gross sales which will be transacted during the term of the license.

Enter filing method.

Cash method requires the payment of tax based on payments received during the month covered by the tax return.

Accrual method requires the payment of tax based on transactions billed during the month covered by the tax return.

IV. IDENTIFICATION OF OWNER(S) OR CORPORATE OFFICERS.

Enter as many applicable; attach a separate sheet if additional space is required.

If this business previously held a GRIC business license so indicate and enter the license number.

V. INDIVIDUALS AUTHORIZED TO RECEIVE BUSINESS LICENE INFORMATION.

Complete as indicated

VI. LOCATION OF TAX RECORDS

Complete as indicated

VII. BUSINESS PURCHASE INFORMATION

Complete this section if you acquired an existing business. Please note, all or part of a business may be acquired or succeeded to "in any manner" which included, but is not limited to, acquisition by purchase, lease, repossession, bankruptcy proceedings, default or through the transfer to a third party.

VIII. GENERAL INFORMATION

Please provide bank, credit or trade references. If none, individuals may enter personal references.

IX. CONSENT TO LIABILITY

You will receive a copy of Title 13 with your license. You acknowledge that you are responsible for reading Title 13 and consent to liability for and payment of all applicable taxes.

X. SIGNATURES

The application must be signed only by individual (s) legally responsible for the business, not agents or representatives.



Gila River Indian Community Business License Application



PLEASE PRINT

I. Type of Application	Type of License
------------------------	-----------------

- | | |
|--|--|
| <input type="checkbox"/> New
<input type="checkbox"/> Change
<input type="checkbox"/> Renewal, License # _____
<input type="checkbox"/> Update, License # _____ | <input type="checkbox"/> Annual License-Non- Member (\$150.00 fee)
<input type="checkbox"/> Annual License-GRIC Enrolled Member (\$5.00 fee)
GRIC Member Number _____
<input type="checkbox"/> Special Event (\$30.00 fee)
Dates of Special Event _____ to _____ |
|--|--|

II. Type of Ownership

- | | |
|---|--|
| <input type="checkbox"/> Individual
<input type="checkbox"/> Partnership <input type="checkbox"/> General <input type="checkbox"/> Limited
<input type="checkbox"/> Limited Liability Partnership
<input type="checkbox"/> Limited Liability Company
State of Registration _____ Date _____ | <input type="checkbox"/> Association
<input type="checkbox"/> Not for Profit Organization
Attach IRS Letter of Determination
<input type="checkbox"/> Corporation <input type="checkbox"/> C Corp <input type="checkbox"/> Sub S
State of Incorporation _____ Date _____ |
|---|--|

III. Business Information

- | | |
|--|--|
| 1) Legal Business Name
_____ | 2) Employer ID Number (EIN) or SSN (Individual)
_____ |
| 3) Business Name or DBA Name
_____ | 4) Contact Name _____ |
| 6) Business Address
_____ | 5) Email Address _____ |
| 7) Mailing Address (If different from Business Address)
_____ | 8) In Care of or Attn:
_____ |
| | 9) Business Phone Number
_____ |
- 10) Is Your Business Located on the Gila River Indian Community Reservation? Yes No
- 11) Detailed description of your business activity (*describe major business activity: principal product you manufacture, commodity sold, or services performed*)

- 12) Location of business activity on the Gila River Indian Community (GRIC)

- | | | |
|--|---------------------------------------|------------------------------------|
| 13) Date business started on GRIC
_____ | 14) Date Sales Began on GRIC
_____ | 15) Estimated Gross Sales
_____ |
|--|---------------------------------------|------------------------------------|
- 16) Filing Method Cash Accural

IV. Identification of Owner (and spouse if married) Partners, Corporate Officers Members and/or Managing Members of Officials (if more space needed attach a separate sheet)

Name (Last, First, M.I.)	SSN	Title	% owned	Residential Address	Phone Number
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Did you have a previous Gila River Indian Community Business License? Yes No If yes, license # _____

V. Individuals Authorized to Receive Business License Information not Listed Above.

VI. Location of Tax Records (by whom and where your records are kept)

Name of Company	Person to Contact
_____	_____
Address (City, State, and Zip Code)	Phone Number
_____	_____

VII. Business Purchase Information

Did you buy an existing business? Yes No
If yes, did that business conduct business on the Gila River Indian Community? Yes No
Did the business have a license issued by the Gila River Indian Community? Yes No

Previous Business Name	Previous Owner's Name
_____	_____
Previous Business Owner's Address	

Previous Owner's Phone Number	GRIC Business License Number
_____	_____

VII. General Information (bank, credit, trade) -Individuals May Use Personal References

References:

Name (Last, First, MI)	Address	Phone Number	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

VIII. Consent to Liability (initials required) _____

You will receive a copy of Title 13 with your license. This an acknowledgement that you are responsible for reading Title 13, and consent to liability for and payment of all taxes imposed by it, and as it may be amended by GRIC Community Council in the future.

IX. Signature(s) by Individuals Legally Responsible for the Business

This application must be signed by a sole owner, two partners, two corporate officers, members and/or managing members, the trustee, receiver or personal reprewentitive of an estate.

Under penalty of perjury I (we) declare that the information on this document is true and correct. Giving false information could result in disapproval and/or revocation of my business license.

Type or print name	Title	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____