



REQUEST FOR CERTIFICATE OF COMPLIANCE

License Number:

Business Name:

Business EIN/SSN:

Business Location Address:

This form is to be used to request a Certificate of Compliance (Letter of Good Standing) on the above listed account and can only be requested by an owner, officer, partner, or statutory agent of the business. Please select the method of delivery below:

Pick Up

Mail (will be mailed to current mailing address on file)

Fax #

I understand my account will be reviewed for delinquencies which could result in a denial. I will be notified of approval or denial via the delivery method I selected above.

Officer, Owner, Partner or Statutory Agent Signature

Date

Printed Name of Officer, Owner, Partner or Statutory Agent

Phone Number & e-mail address

Failure to complete this form may result in a denial of your request. If you have questions about your request or for more information go to: www.glendaleaz.com/taxandlicense