



## Vendor Questionnaire

Complete the information requested below and include additional sheets as necessary. For the purpose of this questionnaire, "Company" refers to the business entity receiving this form.

<b>A. Company Identification</b>			
Legal Business Name		Common Name (dba)	
Headquarters Office Address		Office Telephone Number	
City	State	ZIP Code	
Contact Person	Corporate Officer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact Person Telephone Number (include area code and extension)	
EIN#	TPT License #		
Email	Website		
What Type of Entity is the Company? (e.g. corporation, LLC)		Month and Year Company Began Initial Activity in Arizona M, M   Y, Y	

<b>B. Company Gross Revenue</b>			
Please provide the following information for the last 4 years for Sales or Services to AZ Customers			
Year	Gross Revenue	Year	Gross Revenue

<b>C. Questionnaire</b>		
Do you or your company ...	Yes	No
1. Sell or lease tangible personal property, including digital goods?	<input type="checkbox"/>	<input type="checkbox"/>
2. Sell food or beverages to be consumed upon company property?	<input type="checkbox"/>	<input type="checkbox"/>
3. Lease residential rental property for periods of more than 30 days?	<input type="checkbox"/>	<input type="checkbox"/>
4. Lease residential rental property for periods of less than 30 days?	<input type="checkbox"/>	<input type="checkbox"/>
5. Lease commercial property?	<input type="checkbox"/>	<input type="checkbox"/>
6. Sell admission to participate in events?	<input type="checkbox"/>	<input type="checkbox"/>
7. Lease tangible personal property that is not included in rental of real property?	<input type="checkbox"/>	<input type="checkbox"/>
8. Sell utilities such as electricity, including solar electricity, natural or liquefied gas or plumbing/water services?	<input type="checkbox"/>	<input type="checkbox"/>
9. Provide intrastate telecommunications services by cable or microwave TV system or provide internet service?	<input type="checkbox"/>	<input type="checkbox"/>
10. Publish newspapers, magazines or other publications (not including books or state-issued tourist publications)?	<input type="checkbox"/>	<input type="checkbox"/>
11. Provide job printing, engraving, embossing, copying and pre and post press activities?	<input type="checkbox"/>	<input type="checkbox"/>
12. Have you hired and maintained employees in Arizona?	<input type="checkbox"/>	<input type="checkbox"/>

Continued on page 2 →

**The Department reserves the right to request additional information.**

I declare that the information furnished in this questionnaire is true, correct, and complete.

\_\_\_\_\_  
SIGNATURE OF CORPORATE OFFICER, PARTNER, OR OWNER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

You may send the completed form electronically by clicking "Submit" below or emailing the completed form to [licensecompliance@azdor.gov](mailto:licensecompliance@azdor.gov).