



MCAQD USE ONLY	
Tracking #:	_____
Fee Paid / Date:	\$_____ / _____
S.P. ID Verified	_____
Reviewer:	_____

**APPLICATION FOR  
SUBCONTRACTOR REGISTRATION**

*Arizona Revised Statutes (A.R.S.) 49-474.06 and Maricopa County Rule 200 (Permit Requirements) require subcontractors engaged in dust-generating operations at a site that is subject to a Maricopa County dust control permit to register with MCAQD and pay an annual fee of \$50.00.*

**1. Applicant Information**

Legal Name of Company (INC, LLC, etc.): \_\_\_\_\_

**OR**

Name of Owner(s) (If sole proprietorship  or general partnership ): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Arizona Registrar of Contractors (ROC) #(s): \_\_\_\_\_  
(If applicable)

**2. Mailing and Contact Information**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**3. Delivery of Registration (Check one)**

Mail  E-mail  Fax  Pick-Up (Sole Proprietors required to present ID\*)

**CERTIFICATION OF TRUTH, ACCURACY, AND COMPLETENESS**

*Arizona Revised Statute §13-2704 makes it a criminal offense to knowingly make a false material statement to a public servant in connection with an application for any benefit, privilege, or license.*

I hereby certify that, based on information and belief formed after reasonable inquiry, the statements and information in the Application for Subcontractor Registration are true, accurate, and complete.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Typed or Printed Name of Signer: \_\_\_\_\_ Date: \_\_\_\_\_



# Maricopa County

Air Quality Department

## Subcontractor Registration Application Instructions

### 1. Applicant Information

This area is to be filled out with the business information. The legal name of company is how the business is registered with the Arizona Corporation Commission, <http://www.azcc.gov/>. If you are a **sole proprietor or general partnership** and have a registered trade name with the Secretary of State, you may put that in the legal name of company line. If you are a sole proprietor or general partnership and you **do not** have a registered trade name, skip to the name of owner line and you will be registered under your personal name as you may not register as a DBA, Doing Businesses As.

\*All **sole proprietors** are required to present identification before they are registered. This may be done at the time of submittal at the **One Stop Shop** or if you mail in your application, we will contact you to present your Identification at MCAQD, 1001 N. Central Ave., Ste. 900 Phoenix, AZ 85004. Identification is required as a result of Legal Arizona Workers Act (A.R.S. § 41-1080) requiring documentation of an individual's legal presence in the United States prior to receiving a license or permit to operate a business. You will be required to present one of the following documents:

- 1) **An Arizona driver's license issued after 1996 or an Arizona Non-Operating Identification License,**
- 2) **A driver's license issued by a state that verifies lawful presence in the United States,**
- 3) **A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States,**
- 4) **A United States certificate of birth abroad,**
- 5) **A United States passport,**
- 6) **A foreign passport with a United States visa,**
- 7) **An I-94 Form with a photograph,**
- 8) **A United States Citizenship and Immigration Services Employment Authorization Document or Refugee Travel Document,**
- 9) **A Certificate of United States Naturalization,**
- 10) **A Certificate of United States Citizenship,**
- 11) **A tribal Certificate of Degree of Indian Blood or**
- 12) **A tribal or Bureau of Indian Affairs Affidavit of Birth**

### 2. Mailing and Contact Information

This area is to be filled out with the contact information for your business. This will be the person and address to which all correspondence will be directed.

### 3. Delivery of Registration

This area is to determine how you would like your registration confirmation delivered. \*If you are a sole proprietor you must check the pick-up box as you are required to show ID. If you have already shown ID in person at the One Stop Shop at time of application submittal, you may check one of the other three choices.

### How to Submit Application

Mail or drop off (1) a completed and signed subcontractor registration application and (2) the \$50.00 annual fee to:  
One Stop Shop, 501 N. 44th St., Ste. 200 Phoenix, AZ 85008.

**By mail:** money order, cashier's check, personal check, and company check, payable to "MCAQD".

**At the One Stop Shop:** cash, credit card (MasterCard/Visa), money order, cashier's check, personal check, and company check. We do not accept credit card payments over the phone or via the Internet.

One Stop Shop is open 8:00 a.m. – 4:30 p.m., Monday through Friday (excluding major holidays).

Your registration will be processed and mailed to you within five business days.

**Registrations will be valid for one year.**

For more information on subcontractor registration call (602) 506-6010 or go to our website:

<http://www.maricopa.gov/airquality/divisions/compliance/dust/subcontractorRegistration.aspx>