

INSTRUCTIONS FOR COMPLETING THE CHANGE OF OWNERSHIP/CLOSE OF BUSINESS NOTIFICATION FORM...

REQUESTED ACTION:

1. By selecting the button next to "Transfer all devices to new owner (licensee) and close existing license", you are notifying the Division that the existing license at the listed address is no longer active, and the associated commercial devices will be transferred to a new license at the same address using the information provided in the NEW OWNER (LICENSEE) INFORMATION section.
2. By selecting the button next to "Remove all devices and close existing license", you are notifying the Division that the existing business has closed, and all associated commercial devices are no longer active and will not be transferred to a new owner at the same address.
3. Enter the EFFECTIVE DATE of the requested action (the date that the transfer of ownership will occur, or the date that the existing business (license) will close).

NEW OWNER (LICENSEE) INFORMATION:

1. Only complete this section when the commercial devices on the existing license are being transferred to a new owner at the same address.
2. Provide the BUSINESS NAME, PHYSICAL ADDRESS, and LOCATION CONTACT PERSON(S) information.
3. Provide the OWNER/LICENSEE NAME and BILLING information. The LOCATION E-MAIL address provided will be automatically enrolled to receive license renewal notifications and invoices. If an e-mail address is not provided, renewal notifications and invoices will be sent by mail to the BILLING ADDRESS.
4. If the OWNER/LICENSEE is an INDIVIDUAL, a Statement of Lawful Presence form must be completed and submitted to the Division along with the Change of Ownership/Close of Business form. The Statement of Lawful Presence form is available online at: <https://agriculture.az.gov> using the FORM FINDER provided at the bottom of the homepage.
5. In addition to the information required in this section, the EXISTING LICENSE (PREVIOUS OWNER) INFORMATION section must also be completed.

EXISTING LICENSE (PREVIOUS OWNER) INFORMATION:

1. The business noted in this section will be closed in the Division database, and all associated commercial devices will be removed from the existing license.
2. Provide the BMF, BUSINESS NAME, and PHYSICAL ADDRESS information.

SUBMITTING THE CHANGE OF OWNERSHIP/CLOSE OF BUSINESS FORM:

1. This form must be signed by the existing licensee/owner and the new licensee/owner*.
**Proof of business ownership (such as a bill of sale) may be submitted in lieu of the existing owner/licensee signature.*
2. Forms may be e-mailed to licensing@azda.gov (preferred), sent by fax to **602-542-0466**, or mailed to the address provided at the top of the form.
3. Forms may be rejected by the Division for incomplete and/or incorrect information.

PURSUANT TO A.R.S. § 41-1079, THE FOLLOWING INFORMATION IS PROVIDED TO THE OWNER/LICENSEE OF A COMMERCIAL DEVICE...

A license is required for any device as defined under A.R.S. § 3-3401(13). The license must be obtained within 30 days following the first day of commercial use for original installations of each device. On transfer of a license, new licensees shall notify the Division by submitting the CHANGE OF OWNERSHIP form available at <https://agriculture.az.gov> using the FORM FINDER provided at the bottom of the homepage. NTEP-approved devices shall be the only devices allowed for commercial use. To check if a device has an active NTEP Certificate of Conformance visit the following website: ncwm.com/ntep-certificates

The Division will review and process the form according to the licensing time frame rules provided below. The Owner/Licensee will be billed for the license fee of each device and must remit the amount in full prior to the license being issued.

COMMERCIAL DEVICE LICENSING TIME FRAMES (A.A.C. Title 3, Chapter 7, Article 1, Table 1):

AUTHORITY	ADMINISTRATIVE COMPLETENESS REVIEW	RESPONSE TO COMPLETION REQUEST	SUBSTANTIVE REVIEW	RESPONSE TO REQUEST FOR ADDITIONAL INFORMATION	OVERALL TIME FRAME
A.A.C. R3-7-201	14 days	28 days	30 days	30 days	44 days

AGENCY CONTACTS:

AZDA Licensing: **602-342-3282** or dwm@azda.gov | Technical & Compliance Questions: **602-542-4373, option 4** or dwm@azda.gov | State Ombudsman: **602-277-7292**



**ARIZONA DEPARTMENT OF AGRICULTURE
WEIGHTS AND MEASURES SERVICES DIVISION**

Mailing Address: 1802 W Jackson St #78, Phoenix, AZ 85007
 Physical Address: 1110 W Washington St, Suite 450, Phoenix, AZ 85007
 Phone: 602-342-3282 Fax: 602-542-0466 E-mail: dwm@azda.gov
 Web: agriculture.az.gov State Ombudsman: 602-277-7292

**CHANGE OF OWNERSHIP / CLOSE
OF BUSINESS NOTIFICATION FORM**

REQUESTED ACTION

Transfer all devices to new owner (licensee) and close existing license

Remove all devices and close existing license

EFFECTIVE DATE of requested action:

NEW OWNER (LICENSEE) INFORMATION (REQUIRED ONLY WHEN TRANSFERING DEVICES)

BUSINESS NAME:

PHYSICAL ADDRESS:

CITY:

ZIP CODE:

LOCATION CONTACT PERSON(S):

STORE # (IF APPLICABLE):

LOCATION E-MAIL:

PHONE:

FAX:

OWNER/LICENSEE NAME:

BILLING PHONE:

BILLING ADDRESS:

CITY:

STATE:

ZIP CODE:

EXISTING LICENSE (PREVIOUS OWNER) INFORMATION (REQUIRED WHEN TRANSFERING OR REMOVING DEVICES)

BMF #:

BUSINESS NAME:

PHYSICAL ADDRESS:

CITY:

ZIP CODE:

I certify that the information provided on this form is true and accurate to the best of my knowledge. I understand that omission or falsification of any required information on this form may result in the denial of this license transfer or closure request.

EXISTING OWNER/LICENSEE NAME*

SIGNATURE

DATE

NEW OWNER/LICENSEE NAME

SIGNATURE

DATE

AGENCY USE ONLY

NEW OWNER BMF #:

*Proof of business ownership (such as a bill of sale) may be submitted in lieu of the existing owner/licensee signature.