

**APPLICATION FOR BUSINESS LICENSE FOR 2011-2012  
FOR CONTRACTORS**



**CITY OF PICKENS  
PO BOX 217  
PICKENS, SC 29671**

www.cityofpickens.com

Phone: 864-878-6421 — Fax: 864-878-0450

City of Pickens fiscal year  
May 1, 2011 - April 30, 2012

CONTRACTOR'S BUSINESS LICENSE  
EFFECTIVE UNTIL END OF THIS JOB.  
UPDATE LICENSE FOR EACH JOB.  
PAY MINIMUM ONLY ONCE PER YEAR.

Business or Independent Contractor Information

Emergency Contact Person

Name of Business: \_\_\_\_\_

Your Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

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

City,ST,Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

Ownership Type: \_\_\_\_\_

Responsible Person: \_\_\_\_\_

Location of this job: \_\_\_\_\_

NAICS Classification (if you know it): \_\_\_\_\_

Business Description: \_\_\_\_\_

Other License #: \_\_\_\_\_

Name, Address,  
Phone, and Cell Phone: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

( Corporation, Doing Business As,  
Individual, Sole Proprietor, Partnership,  
Limited Liability Company )

OFFICE USE ONLY

Code: \_\_\_\_\_

Resident: \_\_\_\_\_

Renew: \_\_\_\_\_ FAL: \_\_\_\_\_

\$ \_\_\_\_\_

**Amount of contract for this job**

I hereby certify that the gross revenue reported above is true and correct, subject to penalties in the City of Pickens Business License Ordinance 2010-02.

\_\_\_\_\_  
Signature Title Date

Calculation of license fee based on rate schedule 8.1A

	<u>Rate</u>	<u>Fee</u>
For GROSS RECEIPTS not exceeding \$2,000	\$70.00	\$70.00
On each additional \$1,000 or fraction thereof between \$2,000 and \$1,000,000	X 2.30	_____

**TOTAL FEE** \_\_\_\_\_