Office Use Only:
Account Number:
Business License Year:

Business License Application

Business/Company Name: _____

DBA (If applicable): _____

Location of Business/Contract Job: _____

Mailing Address: [ ] Check here if mailing address is the same as physical

_____

_____

Telephone Number: _____

Email Address: _____

How would you like us to contact you for renewals? [ ] Email [ ] Mail [ ] Both

Responsible Person (Will be listed on business license): _____

Additional Contact (Provide name, telephone number, and email address):

_____

_____

Tax ID (FEIN/SSN): _____

Ownership Type: [ ] Corporation [ ] DBA [ ] Individual [ ] Sole Proprietor [ ] Partnership [ ] LLC

Business Description: _____

If you selling any prepared food and/or beverages on-site, you must collect a 2% Hospitality Tax on those items and must submit a Hospitality Tax Reporting Form Monthly or Quarterly.

Gross Receipts means total income, received or accrued, for one calendar year, collected or to be collected, from business done within the City of Pickens, except income from business done wholly outside of the City of Pickens on which a license tax is paid to some other city or county. If you do not have any gross receipts, the gross receipts will be listed as our base rate of $2,000.00.

Gross Receipts: _____

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.

Business License Fee: _____

_____ _____

Signature Date