



# OCCUPATIONAL TAX APPLICATION

## Business License - City of Statham

Date: \_\_\_\_\_

New [    ]

Renewal [    ]

LICENSE TYPE	LICENSE FEE
Home Business	\$75.00
Occupational License	\$50.00 base fee plus:
1-10 employees	\$200.00
11-20 employees	\$450.00
21-50 employees	\$700.00
51 or more employees	Call for rate
Regulatory Fees, paid in addition to license fee	Fees vary; see schedule

\*\*Owner/Manager is responsible for reporting all changes to your business\*\*

<b>Business Name:</b>		<b>Business Ownership Type:</b> <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other (Explain)			
<b>Federal EIN or SS#:</b>		<b>E-Verify Identification Number:</b>			
<b>State of Georgia Business Registration No.</b>		<b>Tax Class</b>		<b>NAICS Code</b>	
<b>Business Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>	
<b>Mailing Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>	
<b>Renewal Type:</b> <input type="checkbox"/> Renewal with <u>no</u> changes <input type="checkbox"/> Renewal <u>with</u> changes <input type="checkbox"/> Sold <input type="checkbox"/> Closed					
<b>List Any Changes (name, location, mailing address, phone, email):</b>					
<b>Date Sold or Closed:</b>					
<b>Owner/Applicant Name</b>			<b>Corporation Name</b>		
<b>Address</b>			<b>Address</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Office</b>		<b>Mobile</b>	<b>Office</b>		<b>Mobile</b>
<b>Email</b>			<b>Email</b>		

### Related Parties – List Principal Officers of the Business

Name			Name		
Address			Address		
City	State	Zip	City	State	Zip
<b>Mobile #</b>		<b>DOB</b>	<b>Mobile #</b>		<b>DOB</b>
<b>D.L. #</b>		<b>SS#</b>	<b>D.L. #</b>		<b>SS#</b>
<b>Email</b>			<b>Email</b>		

On average, how many employees including owner(s)? Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

Does this occupation require you to obtain a health permit, food service permit? Yes \_\_\_ No \_\_\_  
If yes, a copy of the permit is required as part of the completed application.

Do you sell tobacco products, including vaping products? Yes \_\_\_ No \_\_\_

Do you sell alcoholic beverages? Yes \_\_\_ No \_\_\_

If yes, you need to complete an Alcohol License Application in addition to the Business License Application.

How many gaming tables, electronic or pinball machines do you have or will have this calendar year? \_\_\_\_\_

\*Your business may be subject to Regulatory Fees in addition to the Occupational Tax.

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I, \_\_\_\_\_ being the \_\_\_\_\_(Title) of the business firm named, do hereby register to operate said business the applicant intends to conduct.

Type of Business \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

According to the classification index of the occupation tax ordinance of Statham, Georgia, the undersigned certifies that he/she is the person duly authorized by the business herein named to file this registration and application for the business license, including the accompanying schedules and statements, and that the same are true. I understand, if issued, the business license may be revoked at any time should I fail to meet all requirements of the Occupational Tax Ordinance of the City of Statham.

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

**Return the following items along with this completed application:**

1. Copy of valid driver's license
2. Copy of State of Georgia Business Registration
3. Private Employer Affidavit
4. SAVE Affidavit
5. All application fees, including any regulatory fees.