

OCCUPATIONAL TAX APPLICATION

CITY OF CEDARTOWN*201 EAST AVENUE*PO BOX 65*CEDARTOWN GA 30125*PHONE (770)7483220 X 214

Date _____ Account No. _____

Legal Name of Business _____

Any Associated Trade Names _____

Business Physical Address _____

Mailing Address _____

Local Business Telephone # _____ Fax # _____

Owner of Business _____

Owner's Address _____

Owner's Telephone # _____ Fax # _____

Type of Business _____

Example: Building Construction Contractor, Retail, Professional, Beauty Shop, Hotel, Manufacturing, Repair Shop, Etc.

For Restaurant/Deli Use ONLY

() Preparing and Serving Food OR () Serving Food but NOT Preparing Food

Fed. I.D. _____ Or State I.D. _____

Do you currently have a valid Georgia Occupational Tax License? _____

If so, please provide a copy of your license.

Employee is identified if a W-2 is issued. Please do not include owners/partners.

Average weekly number of FULL TIME employees (40 hours per week) _____

Average weekly number of PART TIME employee's equivalent to full time employees is _____

Total # of Employees is _____

Attached: () Legal U.S. Identification () If state regulated, proof of license/State of GA Certificate of Registration

Within 24 hours of opening & periodically; the City of Cedartown may inspect premises to ensure compliance with public safety regulation, local, state, and federal laws. Failure to comply with regulations may result in revocation of business license. It is unlawful to conduct a business within the City of Cedartown without a business license.

I certify the information contained herein, to the best of my knowledge, is true & correct. I also certify that I have received copies of rules & regulations and I understand there may be other city ordinances, State & or Federal laws that may apply.

Date

Applicants Signature

Occupational License is due on or before February 1, of each year, after which a 15% penalty is charged.

Zoning Verification & Building Inspection Required

Zoning

Signature of City Building Inspector