Occupational Tax Registration Businesses Outside of Columbia County Development Services Division Licensing and Permits Department 630 Ronald Reagan Drive Evans, GA 30809 706-868-3420



		Business Information	
Business Legal Name:			
C	(If registered with the oppoprietor, provide you	Georgia Secretary of State, a copy of the registration is required. If you are a sole ar legal name.)	
Doing Business As:			
Business Type:	(If applicable, the name used to conduct business when different from the legal name.) Corporation General Partnership Other Partnership Limited Liability Corporation Sole Proprietor		
Business Physical Loca	tion:		
Business Mailing Addre	ess:		
Phone:		Email:	
Georgia Jurisdiction tha	t Issued Occupational Tax		
C	1	(A copy of the current, paid occupational tax certificate is required)	
Federal Employer Identification Number:			
		(required for businesses other than sole proprietor)	
Social Security Number:		(required for sole proprietors)	
Description of Business		(1	
busine	ess establishments. The website h	cation System (NAICS) is the standard used by Federal statistical agencies in classifying https://www.census.gov/eos/www/naics/ or your accountant may be helpful in assisting	
you to	choose the most appropriate cod	Applicant Information	
	r a partnership, corporation, limit	rapplication information accupational tax benefit. For a sole proprietor the sole proprietor is the natural person ted liability company or other entity, the natural person applicant is an officer ving authority to bind the entity	
Applicant 1:		Title	
Address:			
Phone:	Email:		
Applicant 2:	Title:		
Address:			
Phone:	Email:		
	Attach additional sl	heets with applicant information if necessary	
	Occupa	ational Tax Application Contact	
Name:			
Phone:		Email:	

Applicant Responsibilities			
I understand that it is my responsibility to comply with all local, state and federal laws and that the issuance of this certificate is			
not deemed an affirmation by the County of such compliance. I further understand it is my responsibility to provide my			
updated occupational tax certificate from the issuing jurisdiction each year. Additionally, I must notify the County in writing of any updates in the address, phone number, or status of my business. I certify that the information provided is true and accurate and contains no false or fraudulent information. I understand that this information, or refusal to provide information, will be provided to the Georgia Department of Revenue per O.C.G.A. Section 48-13-20.1.			
Applicant 1 Signature	Date		
- Approxime 1 2-granuse			
Applicant 2 Signature	Date		