FOR OFFICE USE ONLY	
LIC. NO.	PROCESSED BY
CODE	DATE ISSUED
CLASSIFICATION	

CITY OF NEWBERRY

P.O. BOX 538 NEWBERRY, S. C. 29108
PHONE 803-321-1007 FAX 803-321-1009

APPLICATION FOR BUSINESS AND PROFESSIONAL LICENSE

FOR THE LICENSE YEAR .....

PENALTIES ACCRUE AT 5% OF THE UNPAID FEE FOR EACH MONTH OR PORTION THEREOF AFTER APRIL 15

MAKE SEPARATE APPLICATION FOR EACH BUSINESS TO BE LICENSED AT EACH LOCATION
★★★★★ BUILDING, PLUMBING, ELECTRICAL, HVAC CONTRACTORS MUST INCLUDE COPY OF S.C. REGISTRATION/CERTIFICATION

PAYMENT MUST ACCOMPANY APPLICATION

BUSINESS NAME:

MAILING ADDRESS:

1. BASIC LICENSE FEE $.....
PLUS
2. SCHEDULE RATE CHARGE $.....
3. LICENSE FEE (1+2) $.....
4. PLUS PENALTY _____ % $.....
5. TOTAL LICENSE FEE (3+4) $.....

INVOICE NUMBER _____

IF INFORMATION IN THIS HEADING IS CORRECT CHECK HERE ☐ AND SKIP TO LINE 3.

ALL APPLICABLE BLANKS ON THIS APPLICATION MUST BE COMPLETED BEFORE A LICENSE WILL BE ISSUED

1. NAME OF BUSINESS .....
2. MAILING ADDRESS: STREET .....
CITY.....STATE.....ZIP.....
3. .....
BUSINESS LOCATION ☐ IN CITY ☐ OUT OF CITY PHONE NO.
EMAIL ADDRESS.....
4. .....
TYPE OF BUSINESS

5. THIS APPLICATION IS FOR:
- CHANGE OF OWNERSHIP ☐ _____ PREVIOUS OWNER
- CHANGE IN LOCATION ☐ _____ PREVIOUS LOCATION
- NEW BUSINESS ☐ _____ STARTING DATE
- RENEWAL OF LICENSE ☐

6. OWNERSHIP:
- PROPRIETORSHIP ☐
- PARTNERSHIP ☐
- CORPORATION ☐

7. NAME/ADDRESS OF OWNER:
_____
_____
_____

8a. FOR CONSTRUCTION CONTRACTORS ONLY:
IS THIS A JOB LICENSE? YES __ NO __
JOB CONTRACT AMOUNT $ _____

8b. FOR JOB LICENSE:
JOB LOCATION _____
CONTRACTED BY _____

9a. FOR RENEWAL:
TOTAL GROSS RECEIPTS FOR PRECEDING CALENDAR YEAR ENDING DECEMBER 31, _____ OR FOR LAST PRECEDING FISCAL YEAR PERIOD FROM _____ TO _____; GROSS RECEIPTS $ _____

9b. FOR NEW BUSINESS OR CHANGE OF OWNERSHIP:
ESTIMATED GROSS RECEIPTS OF $ _____

9c. ALLOWABLE ORDINANCE DEDUCTIONS _____

10. SOC. SEC. NO. _____
FED. IDENT. NO. _____
S.C. SALES TAX NO. _____

11. NAME OF YOUR ACCOUNTANT
_____

12. NUMBER OF COIN OPERATED MACHINES (TYPE BY LOCATION ITEMIZED ON ATTACHED SHEET):

VENDING _____ POKER _____ OTHER _____

FOR NEW BUSINESS, CHANGE OF OWNERSHIP, OR CHANGE OF LOCATION:

APPROVED ☐
DISAPPROVED ☐ ..... PLAN./DEV. DEPARTMENT

APPROVED ☐
DISAPPROVED ☐ ..... FIRE/POLICE DEPARTMENT

APPROVED ☐
DISAPPROVED ☐ ..... HEALTH DEPARTMENT

This is to certify that the above is a true statement of the business done or transacted at or through the above location and the report corresponds with the books and records of the business and with the report of same filed, or to be filed, for the corresponding period with the S.C. Department of Revenue or Insurance Commissioner and with the U.S. Internal Revenue Service. The exact amount returned as TOTAL GROSS RECEIPTS from this business or profession as reported herein is true and correct. I am familiar with the City Ordinance providing for penalties and revocation of this license for making false or fraudulent statements in this application. The books of this business are available for inspection by authorized agents of the City. I (We) do hereby certify that all personal property taxes have been paid which are due and payable to the City of Newberry as of this date.

_____ _____
SIGNATURE AND TITLE OF PERSON MAKING OATH DATE

PLEASE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION

The City of Newberry has computer software in place to calculate each business license fee and assign an invoice number. To make the renewal process work smoothly, please call our telephone number (803-321-1007) with your gross receipts figure prior to mailing or hand-delivering your business license payment. If you have any questions, please contact the Finance Department at 803-321-1007.

FOR HOME OCCUPATION BUSINESSES ONLY (such as Avon sales, typing services, tutoring services, seamstress services):

By my signature on this application, I do hereby acknowledge that I have read, understood and will comply with the provisions concerning home occupations as found in the City of Newberry Zoning Ordinance. I further acknowledge that application for a City of Newberry Business License has been made pursuant to my expressed intent to comply with all provisions of the City of Newberry Zoning Ordinance.

City of
Newberry
SOUTH · CAROLINA

www.cityofnewberry.com

RATE INFORMATION AVAILABLE AT
THE CITY OF NEWBERRY FINANCE DEPARTMENT
1330 COLLEGE STREET
NEWBERRY, SOUTH CAROLINA 29108
DURING NORMAL OFFICE HOURS
TELEPHONE 803-321-1007 FAX 803-321-1009