



City of Goose Creek, South Carolina Business License Application

For Office Use Only	
Date Issued:	_____
License Number:	_____
Class:	_____
NAIC Code:	_____

1. _____ New Business _____ Corporation _____ Location Change _____ NWS Contractor
 _____ Renewal _____ Individual _____ Name Change _____ Contractor
 _____ Update _____ Partnership Previous Location: _____
 Previous Name: _____

PLEASE PRINT

- 2. Business Name _____
- 3. Mailing Address _____
- 4. City _____ 5. State _____ 6. Zip _____
- 7. Physical Location of Business (if a contractor please put job location) _____
- 8. Business Web Address _____ 9. Name of Point of Contact _____
- 10. Local Phone # _____ 11. Fax # _____
- 12. Home Office Phone # _____ 13. E-Mail _____
- 14. Federal Tax Id. Number _____ 15. State Retail Sales # _____
- 16. Type of Business _____

Gross Receipts for preceding calendar year ending Dec. 31 or for preceding fiscal year period. If this is a new business license application please estimate your gross receipts from the business start date to **Dec. 31 of current year.**

17. From Date

18. To Date

19. Total Gross Receipts/Contract Amount
 \$ _____
If more than 1 class rating please attach explanation of fee calculation.

20. Computation of Fees
 Business License Fee \$ _____
 Amuse. Mach _____ X \$12.50 = _____
 Pool Table _____ X \$12.50 = _____
 Penalty _____ % = _____
 Express Permit \$ _____
 Total Fee Due \$ _____

Must be completed by all businesses except Corporations (Limited Liability Companies & Limited Liability Partnerships must complete).

- 21. Business Owners Name _____
- 22. Address _____
- 23. City _____ 24. State _____ 25. Zip _____
- 26. Social Security Number _____ 27. Date of Birth _____ 28. Drivers License # _____

*****Certification of Applicant*****

I(We) do hereby certify that the information given in this application is true. That the gross income is accurately reported or estimated for a new business without any unauthorized deduction, and that all assessments and personal property taxes due and payable to the city have been paid. I understand that issuance of a city business license does not relieve me of the responsibility of meeting all City of Goose Creek Zoning and Building Code requirements, and that I am subject to all provisions of the business license ordinance of the City of Goose Creek. I also understand and authorize the City of Goose Creek and it's Agents to utilize all information on this application for the purposes of obtaining a business license and insuring that all other Federal, State, and Local laws are followed.

 Signature of Owner or Authorized Agent

 Printed Name of Owner or Authorized Agent

 Title

 Date

For Office Use Only	
Police Dept:	_____
Attachments	_____ yes _____ no
Building Insp:	_____
City Planner:	_____
Finance Dir:	_____
City Admins:	_____