

APPLICATION FOR
BUSINESS LICENSE FOR CALENDAR YEAR 19 _____

Return Application to:
Town of Ridgeland
P.O. Box 1119
Ridgeland, S.C. 29936

In order to insure proper credit to your account, you must return this application. Please verify all information listed, then complete this application as required.

PENALTY DATE _____

PRINT DATE _____

BUS NAME _____

OWNER / OFFICER _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

TELEPHONE # _____

BUSINESS LOCATION _____

DESCRIPTION OF BUSINESS _____

* RATE CODE _____

SC RESIDENTIAL BLDRS # _____

BONDING COMPANY _____

NEW BUSINESS _____ RENEWAL _____

CORPORATION _____ PARTNERSHIP _____

INDIVIDUAL _____

FEDERAL ID# _____

SOUTH CAROLINA TAX # _____

SOCIAL SECURITY # _____

HEALTH PERMIT _____

* LICENSE # _____

* DATE OF APPLICATION _____

* OFFICE USE ONLY

(A) GROSS RECEIPTS AS REPORTED TO THE S.C. TAX COMMISSION ----- \$ _____

(B) NEW BUSINESS ONLY PROJECTED GROSS INCOME ----- _____

(C) BASE TAX ----- _____

(D) TAX ON EXCESS AT \$ _____ PER \$ _____ ----- _____

(E) TOTAL LICENSE FEE DUE BY ----- _____

(F) PENALTY: FOR NON-PAYMENT OF ALL OR ANY PART OF THE CORRECT LICENSE FEE THE LICENSE INSPECTOR SHALL LEVY AND COLLECT A PENALTY OF 5% MARCH 1, 10% APRIL 1, MAY 1 IN EXECUTION.

(G) TOTAL DUE ----- \$ _____

(WE) DO HEREBY CERTIFY THAT THE AMOUNT RETURNED AS TOTAL GROSS FROM BUSINESS OR PROFESSION AS REPORTED HEREIN IS TRUE / CORRECT, AND THAT I HAVE MADE NO DEDUCTION FOR "DROP SHIPMENTS", "SALES TO GOVERNMENT AGENCIES", "OUT OF CITY OR COUNTY DELIVERY OR OTHERWISE, AND THAT I AM FAMILIAR WITH TOWN ORDINANCE PROVIDING FOR PENALTIES AND REVOCATION OF MY (OUR) LICENSE FOR MAKING FALSE OR FRAUDULENT STATEMENTS IN THIS APPLICATION.

(WE) DO HEREBY CERTIFY THAT ALL PERSONAL PROPERTY TAXES HAVE BEEN PAID WHICH ARE DUE AND PAYABLE TO THE TOWN OF RIDGELAND OF THIS DATE AND THAT THE BUSINESS NAME IS THE SAME AS REPORTED ON MY SOUTH CAROLINA INCOME TAX RETURN.