

**APPLICATION FOR BUSINESS LICENSE FOR THE CALENDAR YEAR 2017**

TOWN OF DUE WEST  
 P.O. BOX 278, 103 MAIN ST.  
 DUE WEST, SC 29639  
 PHONE: 864/379-2385  
 FAX: 864/379-2883

**\*\*\*\*\*AVOID PENALTY\*\*\*\*\***

This application must be completed & returned  
 with full payment on or before 4/30/2017.

**Please Mark Applicable Type of Business:**

- Business with a Store/Office **Inside** Town Limits  Business with a Store/Office **Outside** Town Limits  
 (Only report revenue acquired inside the Town)

Application Type (Check all that apply):  New Business  Renewal  Ownership/Location Change  Home-Based/Internet Business

Business Name: _____ <p align="center"><i>Please Print</i></p> Doing Business As: _____ Location of Business: _____ Mailing Address: _____ City, St., Zip: _____ Business Phone: _____ Cell: _____ Email: _____ FAX#: _____ Business Description: _____ Does the business rent or consign booths (barbers, antiques, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", how many booths? _____ NAICS#: _____	Ownership Type: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC Business Owner: _____ Tax ID# (FEIN or SSN): _____ State Retail License #: _____ Other License #: _____ Accountant's Name: _____ Accountant's Phone: _____ Landlord's Name: _____ Landlord's Address: _____ Landlord's Phone: _____
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

\$ \_\_\_\_\_ **GROSS RECEIPTS (January 1, 2016 through December 31, 2016)**

*Definition of Gross: "Gross income" means the total income of a business, received or accrued, for one calendar year collected or to be collected from business done within the Town. New businesses should list their projected gross revenue from the business start date through December 31st.*

I (We) do hereby certify under oath that:

- the above information given in this license application is true and correct;
- that the gross income is accurately reported, or estimated for a new business, without any unauthorized deduction;
- that all businesses may be subject to income verification; and
- that all other monies due and payable to the Town of Due West have been paid.

I understand that this license may be denied, suspended or revoked, in addition to other penalties, for making false or fraudulent statements in this application. It is unlawful for any person to make a false application for a business license, or to give or file, or direct the giving or filing of any false information.

_____ Signature	_____ Print Name and Title	_____ Date
--------------------	-------------------------------	---------------

Calculation of license based on Rate Class _____ For Gross Receipts not exceeding \$2,000 (Base Rate) On each additional \$1,000 or fraction thereof up to \$1,000,000 On each additional \$1,000 or fraction thereof above \$1,000,000 up to \$2,000,000 On each additional \$1,000 or fraction thereof above \$2,000,000 up to \$3,000,000 On each additional \$1,000 or fraction thereof above \$3,000,000 up to \$4,000,000 On each additional \$1,000 or fraction thereof above \$4,000,000 5% Penalty Per Month (After 4/30/17)	<b>RATE</b> _____ _____ _____ _____ _____ _____	<b>TOTAL</b> _____ _____ _____ _____ _____ _____
<b>TOTAL FEE DUE</b>		_____

**Call Town Hall at 864/379-2385 for help calculating the fee.** Fractions of thousands are not used; round up the gross to the next thousand. A declining rate is used for gross amounts above \$1,000,000.