

**Application for Business
and Professional License
for the License Year**

CITY OF FLORENCE

Business License Office
324 W. Evans St.
Florence, SC 29501
Tel: 843-665-3173
Email: blicense@cityofflorence.sc.gov

FOR OFFICE USE ONLY		
ID NO.		PROCESSED BY
CLASS	NAICS	DATE PROCESSED
ID VERIFIED BY		

MAKE SEPARATE APPLICATION FOR EACH BUSINESS TO BE LICENSED AT EACH LOCATION
PLEASE PRINT OR TYPE AND NOTE CORRECTION
SEE REVERSE SIDE FOR ADDITIONAL IMPORTANT INFORMATION

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

1. Firm Name _____
D/B/A _____
Mailing Address _____
City/State/Zip _____
Email _____

2. _____
Business Street Address & Zip Code In City Out of City

Business Phone Mobile Phone

3. Type of Business _____

4. New Business (Starting Date) _____
Location Change

5. Single Ownership Partnership Corporation

6. Owner/Officer Name _____

7. Home Street Address _____

City/State/Zip _____

Telephone _____

CONTRACTORS ONLY

8. Project Name _____
Project Address _____
Estimated Start Date _____
Estimated Completion Date _____
Total Contract Value \$ _____
(Use this figure for Business License Fee Calculation)
SC License # _____ Exp. Date _____

**SKIP LINE 9 AND PROCEED TO
BUSINESS LICENSE FEE CALCULATION**

GROSS INCOME

9. Estimate Gross Income from Opening Date until following April 30.
\$ _____

BUSINESS LICENSE CALCULATION

BASIC LICENSE FEE OF \$ _____ ON 1ST \$2,000 OF GROSS
INCOME PLUS SCHEDULED RATE CHARGE OF \$ _____ PER
\$1,000 FOR GROSS INCOME IN EXCESS OF 1ST \$2,000.

(If Gross Income exceed \$1 million, see reverse side for instructions.)

AMOUNT DUE \$ _____

PENALTY \$ _____

TOTAL DUE \$ _____

I certify that all of the information stated above is true and correct to the best of my knowledge and belief. I certify that all assessments and personal property taxes due and payable to the City have been paid. I understand that the City Ordinance provides for penalties and license revocation for making false or fraudulent statements on this application.

SIGNATURE

FEDERAL ID# OR SOCIAL SECURITY #

DATE

PRINTED NAME

TITLE

PLEASE SIGN AND RETURN COMPLETED FORM. PAYMENT MUST ACCOMPANY APPLICATION.

LOCATION CHANGE

A change of address must be reported to the license inspector within ten (10) days after removal of the business to a new location and the license will be valid at the new address upon written notification to the license inspector and compliance with zoning and building codes.

CHANGE OF OWNERSHIP

A business license shall not be transferable and a transfer of ownership shall be considered a termination of the old business and establishment of a new business requiring a new business license based on old business income.

NAICS 230000 Contractors

- A. Resident contractors with place of business located inside the City: \$75 for 1st \$2,000 plus \$1.69 for each additional thousand (fractions rounded up to next thousand) on contract amounts inside and outside the City.
(Deductions may be made for receipts reported to another city with documentation.)
- B. Non-resident contractors: \$150 for 1st \$2,000 plus \$3.38 for each additional thousand (fractions rounded up to next thousand) on contract amounts inside City.
- The total fee for the amount of the contract shall be paid prior to commencement of work and shall entitle contractor to complete the job without regard to the normal license expiration date.
 - No contractor shall be issued a business license until all state and city qualification examination and trade license requirements have been met. Each contractor shall post a sign in plain view on each job identifying the contractor with the job.
 - No contractor shall be issued a business license until all performance and indemnity bonds required by the City building code have been filed and approved.
 - Subcontractors shall be licensed on the same basis as general or prime contractors for the same job, and no deductions shall be made by a general or prime contractor for value of work performed by a subcontractor.
 - Each prime contractor shall file with the license inspector a list of subcontractors furnishing labor or materials for each project.

MINIMUM FEES AND RATES ARE DOUBLED FOR NON-RESIDENTS AND ITINERANTS HAVING NO FIXED PRINCIPAL PLACE OF BUSINESS WITHIN THE MUNICIPALITY.

DECLINING RATE SCHEDULE

Declining rate applies in all classes for gross income in excess of one million dollars (\$1,000,000) as follows:

<u>Amounts (in Millions)</u> <u>Gross Income</u>	<u>Percent of Rate for</u> <u>each additional \$1,000.00</u>
0 to less than or equal to 1	100%
More than 1 but less or equal to 4	90%
More than 4 but less or equal to 7	75%
More than 7 but less or equal to 10	50%
More than 10 but less or equal to 20	25%
More than 20	10%

The City of Florence under Title VI of the Civil Rights Act of 1964 and related statutes, ensures that no person shall on the grounds of race, color, national origin, sex, disability, or age, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity it administers.

La ciudad de Florencia en el Título VI de la Ley de Derechos Civiles de 1964 y los estatutos, se asegura de que ninguna persona por motivos de raza, color, origen nacional, sexo, discapacidad, edad, ser excluido de participar en, ser negado los beneficios de, o ser de otra manera sujeto a discriminación bajo cualquier programa o actividad que administra.