

APPLICATION FOR BUSINESS LICENSE FOR THE FISCAL YEAR 2024-2025

TOWN OF SANTEE
 POST OFFICE BOX 1220
 194 MUNICIPAL WAY
 SANTEE, SC 29142



PHONE: (803) 854-2152
 FAX: 803-854-3233

AVOID PENALTY

This Application with remittance in full must be completed and returned with full payment on or before **04/30/2024(for annual renewals)**. If no longer in business, please so indicate and return the application to avoid further penalty.

BUSINESS NAME AND MAILING ADDRESS	EMERGENCY CONTACT NAME AND ADDRESS
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Name: _____ Address: _____ Address 2: _____ City, St., Zip: _____ Phone: _____ Location: _____ Business Class: _____ Responsible Person: _____ Bonding Company & Bond Number: _____ Other License #: _____	_____ _____ _____ _____ Tax ID Number: _____ Ownership Type: _____ Business Description: _____ Accountant Name: _____ _____ State Retail License #: _____
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CALCULATION OF LICENSE FEE:		<u>LICENSE FEE</u>
GROSS RECEIPTS	\$ _____	_____
	Late Payment Penalty 5% (Per Month or Portion Thereof)	_____
	Total Payment	=====

Please Call 803-854-2152 ext. 201 for License Fee Amount.

Attach current copy of driver's license and all State required certifications or license for business or profession (Contractor, Specialty Contractor, etc.).

I CERTIFY THAT THE INFORMATION GIVEN IN THIS APPLICATION IS TRUE.

_____	_____	_____
Signature	Title	Date

PLEASE NOTE: All businesses will pay a fee based on prior year gross receipts. All businesses may be subject to income verification. All business conducted outside the Town of Santee by in-town businesses and reported to another municipality for a business license may be deducted from the gross receipts. Out of town businesses must provide documentation of gross receipts for work done within the town limits of Santee.

CHECK/CASH	NEW – N	OUT OF BUSINESS – X	TRANSFER – T	NAME CHANGE – NC	OTHER -O
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