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



## AVOID PENALTY

This Application with remittance in full must be completed and returned with full payment on or before **04/30/2023(for annual renewals).** If no longer in business, please so indicate and return the application to avoid further penalty.

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

BUSINESS NAME AND MAILING ADDRESS EMERGENCY CONTACT NAME AND ADD			
Name:			
Address:			
Address 2:			
City, St., Zip:			
Phone:	Tax ID Number:		
Location:	Ownership Type:		
Business Class:	Business Description:		
Responsible Person:	Accountant Name:		
Bonding Company & Bond Number:			
Other License #: State Retail License #:			
CALCULATION OF LICENSE FEE:		LICENSE FEE	
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 Contractor, etc.).	or license for business or profession (Contrac	tor, Specialty	
I CERTIFY THAT THE INFORMATION GIVEN IN THIS APPLICATION IS	STRUE.		
Signature	Title	Date	
Signature		Dale	

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