

**BUSINESS LICENSE APPLICATION**

City of Walterboro  
 Attn: Business License  
 300 Hampton Street  
 Walterboro, SC 29488  
 (843) 782-1065



To ensure proper credit to your account, you must return this application. Please verify all information listed, and then complete this application as required

LICENSE YEAR: \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

Date of Application \_\_\_\_\_

This application is for:  New  Renewal

Business Name	Business Type
Mailing Address	NAICS Code
City/State/Zip	SIC Code
Business Location	Rate Class
Federal ID #	Corporate Phone Number
SSN #	Email
State Retail #	Owner Name
SC Residential Builders #	Address
Drivers License #	City/State/Zip

**FOR CONTRACTOR**

**JOB SITE ADDRESS:**

**\*\*\*PLEASE INCLUDE VERIFICATION OF GROSS RECEIPTS\*\*\***

(A) Gross Receipts	\$	_____
(B) Less Gross business on which a license fee was paid to another county or city		_____
(C) Total Taxable Receipts (A-B)		_____
(D) Base Tax (first \$2,000.00)		_____
(E) Tax on excess at \$_____ per \$1,000.00		_____
(F) Penalty 5% PER MONTH BEGINNING MAY 1		_____
(G) Total License Fee Due	\$	_____

I(We) do hereby certify that the amount returned as Total Gross from business or profession as reported herein is true and correct, and that I have made no deduction for "drop shipments", "sales to government agencies", "out of city or county deliveries", or otherwise, and that I am familiar with the city ordinance providing for penalties and revocation of my(our) license for making false or fraudulent Statements in this application.

I(We) certify that all personal property taxes have been paid which are due and payable to the City of Walterboro as of this date and that the business name reported herein is the same as on my tax return.

Signature

Title

Date