



**CITY OF WEST COLUMBIA**  
 Business License Division - City Hall  
 PO Box 4044  
 West Columbia SC 29171-4044  
 Phone (803) 791-1880

**RETURN SERVICE REQUESTED**

FOR OFFICE USE ONLY	
LICENSE NO.:	_____
APPROVED BY:	DATE ISSUED: _____
ZONING: _____	APPROVED _____
	DISAPPROVED _____
<b>LICENSE FEE</b>	_____
<b>PENALTY</b>	_____
<b>TOTAL</b>	_____
FOR RENEWAL OF LICENSE, PLEASE VERIFY ALL INFORMATION AS LISTED. THEN COMPLETE THIS APPLICATION AS REQUIRED. REFER TO CITY OF WEST COLUMBIA BUSINESS AND PROFESSIONAL LICENSE ORDINANCE FOR APPLICABLE RATES.	

## APPLICATION FOR BUSINESS OR PROFESSIONAL LICENSE THE CALENDAR YEAR 2019

**MAKE SEPARATE APPLICATION FOR EACH BUSINESS TO BE LICENSED AT EACH LOCATION. PLEASE SEND PAYMENT WITH APPLICATION**

<b>LOCATION OF BUSINESS</b>	<b>TYPE OF BUSINESS</b>

**ALL TAXES MUST BE PAID  
BEFORE LICENSE IS ISSUED.**

PENALTY: DELINQUENT MAY 1ST.  
PENALTY FOR DELINQUENCY IN PAYING LICENSE TAX IS  
5% PER MONTH OR FRACTION THEREOF UNTIL PAID.

**SOCIAL SECURITY NO. AND/OR FEDERAL EMPLOYER'S IDENTIFICATION NUMBER** \_\_\_\_\_

IF INFORMATION LISTED IN HEADING IS CORRECT CHECK HERE  AND SKIP TO ITEM #5. FOR NEW BUSINESS OR CORRECTIONS TO HEADING ABOVE, FILL IN ITEMS 1, 2, 3, 4, ETC.

<p>1. _____ NAME OF APPLICANT (INDIVIDUAL OR FIRM) <span style="float: right;">TRADE NAME</span></p> <p>2. _____ MAILING ADDRESS</p> <p>3. _____ BUSINESS LOCATION <span style="float: right;">PHONE NO.</span></p> <p>4. _____ TYPE OF BUSINESS</p> <p>6. REPORT APPLICABLE FIGURE FOR PRECEDING YEAR:</p> <p>_____ GROSS FOR WORK OUTSIDE CITY NOT PAID TO OTHER AGENCIES      WEST COLUMBIA GROSS</p> <p>7. _____ TOTAL GROSS PAID TO OTHER MUNICIPALITIES (LIST LOCATION ON BACK)      GROSS PREMIUMS</p> <p>8. _____ IF THIS IS CHANGE IN OWNERSHIP. GIVE NAME OF PREVIOUS OWNER</p> <p>9. _____ IF YOU EMPLOY AN ACCOUNTING OR BOOKKEEPING FIRM, GIVE NAME, ADDRESS AND PHONE NO.</p> <p>10. _____ LIST NAMES OF PARTNERS OR OFFICERS OF FIRM, AND THEIR TITLES.</p>	<p>5. THIS APPLICATION IS FOR: _____ STARTING DATE _____</p> <p><input type="checkbox"/> NEW BUSINESS</p> <p><input type="checkbox"/> RENEWAL OF LICENSE</p> <p><input type="checkbox"/> CHANGE OF OWNERSHIP</p> <p><input type="checkbox"/> CHANGE IN LOCATION</p> <p><input type="checkbox"/> CORPORATION</p> <p><input type="checkbox"/> CO-PARTNERSHIP</p> <p><input type="checkbox"/> SINGLE OWNERSHIP</p> <table style="width: 100%; border-top: 1px solid black;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;"><b>STATE LICENSE</b></td> </tr> <tr> <td></td> <td style="text-align: center;">TYPE _____ M.E.# _____</td> </tr> <tr> <td></td> <td style="text-align: center;">NUMBER _____ M.P.# _____</td> </tr> <tr> <td></td> <td style="text-align: center;">LIMIT _____ M.G.# _____</td> </tr> </table>		<b>STATE LICENSE</b>		TYPE _____ M.E.# _____		NUMBER _____ M.P.# _____		LIMIT _____ M.G.# _____
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### ATTENTION CONTRACTORS

**ITINERATE CONTRACTORS (NO PLACE OF BUSINESS WITHIN CITY OR NON RESIDENT) MUST RENEW UPON ENTERING CITY LIMIT.**

**A.** THIS IS TO CERTIFY THAT THE ABOVE IS A TRUE STATEMENT OF THE BUSINESS DONE OR TRANSACTED AT OR THROUGH THE ABOVE LOCATION FOR THE CALENDAR YEAR ENDING DECEMBER 31, 20\_\_\_\_; OR LAST COMPLETED FISCAL YEAR AND THE REPORT CORRESPONDS WITH THE BOOKS AND RECORDS OF THE BUSINESS AND WITH THE REPORT OF SAME FILED, OR TO BE FILED, FOR THE CORRESPONDING PERIOD WITH THE SOUTH CAROLINA TAX COMMISSION, OR INSURANCE COMMISSIONER, AND WITH THE COLLECTOR OF INTERNAL REVENUE OF THE UNITED STATES.

**B.** I (WE) DO HEREBY CERTIFY THAT THE EXACT AMOUNT RETURNED AS TOTAL GROSS RECEIPTS FROM MY BUSINESS OR PROFESSION AS REPORTED HEREIN ARE TRUE AND CORRECT, AND THAT I HAVE MADE NO DEDUCTIONS FOR "DROP SHIPMENTS," "SALES TO GOVERNMENTAL AGENCIES," "OUT OF TOWN 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.

**AFTER HOURS EMERGENCY:**

NAME \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

RETURN TO:

**CITY OF WEST COLUMBIA**  
 Business License Division - City Hall  
 PO Box 4044  
 West Columbia SC 29171-4044

DATE \_\_\_\_\_, 20\_\_\_\_

(SIGNED) \_\_\_\_\_ (SEAL)

(Signature of Applicant)

BY \_\_\_\_\_

(Signature of Person Executing for Firm or Corp.)

**TAX PAYMENT CERTIFICATION**

I CERTIFY THAT ALL ASSESSMENTS AND PERSONAL PROPERTY TAXES DUE AND PAYABLE TO THE CITY HAVE BEEN PAID.

**LIST LOCATION OF CONTRACT WORK OUTSIDE WEST COLUMBIA ON WHICH LICENSE FEE(S) WAS PAID TO OTHER CITIES OR TOWNS. GIVE CROSS CONTRACT BUSINESS AT EACH LOCATION.**

NAME OF CITY OR TOWN	NAME OF JOB	AMOUNT

**BUSINESS LICENSE INFORMATION**

Every person engaged in any business, in whole or in part, within the limits of the City of West Columbia is required to pay an annual license fee.

Gross income means the total income of a business. The gross income may be verified by reports filed with the Internal Revenue Service, the South Carolina Department of Revenue, or other governmental agencies.

Each license shall be issued for one calendar year and shall expire on December 31.

The License fee shall be paid on or before the 30th day of April in each year. A separate license shall be required for each place of business, each name of business and for each classification of business conducted at one place.

Application shall contain the Social Security Number and/or the Federal Employer’s Identification Number, the business name as reported on the South Carolina income tax return. The applicant shall certify under oath that all assessments and personal property taxes due and payable to the City have been paid. Zoning, Fire, and Building inspections are required of all new business with a location within the City prior to a license being issued.

No deductions from gross income shall be made except income from business done wholly outside of the City on which a license tax is paid to some other municipality or a county, or income which cannot be taxed pursuant to State law.

It shall be unlawful to make a false application.

All person shall display the license in a conspicuous place in the business establishment. A transient or non-resident shall carry the license upon his person or in a vehicle used in the business. Failure to obtain the approval of the License Inspector for a change of address shall invalidate the license and subject the licensee to prosecution.

The license Inspector is empowered to make inspections, examine and audit books and records. In the event an audit or inspection reveals that false information has been filed by the licensee, the cost of the audit shall be added to the correct license fee and late penalties in addition to other penalties. Each day of failure to pay the proper amount of license fee shall constitute a separate offense.

For non-payment of all or any part of the correct license fee, the License Inspector shall levy and collect a late penalty of five (5%) percent of the unpaid fee for each month or portion thereof after the due date until paid. If any license fee shall remain unpaid for sixty (60) days after its due date, the License Inspector shall issue an execution which shall constitute a lien upon the property of the licensee for the tax penalties and cost of collection.

Any person violating any provision of this ordinance shall be deemed guilty of a misdemeanor and subject to a fine of up to \$500.00 or imprisonment for not more than 30 days upon conviction. Each day of violation shall be considered a separate offense. Punishment for violation shall not relieve the offender of liability for delinquent penalties and cost provided for herein.

**RATES**

Declining rate applies in all Classes for gross income in excess of \$1,000,000.

Class	Income: 0-\$2,000	All over \$2,000 Rate per thousand or fraction thereof
1-A	\$25.00	\$.70
1	25.00	.85
2	30.00	1.00
3	35.00	1.15
3-A	35.00	.75
4	40.00	1.30
5	45.00	1.45
6	50.00	1.60
7	55.00	1.75
8	See Individual business in Class at <a href="http://www.westcolumbiasc.gov">www.westcolumbiasc.gov</a>	

Amount (In Millions) Gross Income	Percent of Rate for each additional \$1,000
0-1	100%
1-2	95
2-3	90
3-4	85
4-5	80
5-6	75
6-7	70
7-8	65
8-9	60
9-10	55
over 10	50