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THE TOWN OF CHESTERFIELD BUSINESS LICENSE RENEWAL APPLICATION

CUSTOMER NUMBER: RATE CLASS: 4A

Corporation Sole Proprietor Partnership LLC Location of Business if different than mail address: Resident Business Non-Resident Business Type of Business Location Phone # Cell Phone # Email Address: SS # SS # Federal ID# SC Contractor's License # SC State Retail License #

Mailing address

Handwritten lines for mailing address

FOR LICENSE YEAR: 05/01/2020 - 04/30/2021

Table with 2 columns: Description, Amount. Rows include Gross Income, Minus Base Fee, Balance, and various multipliers for tax calculations.

Table with 2 columns: Description, Amount. Rows include Base Fee, Tax on excess (11-15), TOTAL LICENSE TAX, PENALTY, and TOTAL LICENSE TAX AND PENALTY DUE.

Renewal fees are due upon receipt. Penalties apply after May 31.

THE GROSS INCOME SHALL CONFORM WITH THE SC TAX COMMISSION. ALL OTHERS SHALL SUBMIT FEDERAL TAX REPORTS THAT REFLECT GROSS INCOME. THE APPLICANT SHALL HAVE THE BURDEN TO ESTABLISH THE RIGHT TO EXEMPT INCOME BY SATISFACTORY RECORDS AND PROOF SUBMITTED WITH THEIR APPLICATION. DEDUCTIONS WILL NOT BE ACCEPTED WITHOUT WRITTEN DOCUMENTATION FROM NECESSARY AGENCY.

I (WE) DO HEREBY CERTIFY THAT THE AMOUNT RETURNED AS TOTAL GROSS FROM MY (OUR) BUSINESS OR PROFESSION AS REPORTED HEREIN IS TRUE AND CORRECT, AND THAT I AM FAMILIAR WITH THE CITY ORDINANCE PROVIDING FOR PENALTIES AND REVOCATION OF MY (OUR) LICENSE FOR MAKING FALSE FRAUDULENT STATEMENTS IN THIS APPLICATION.

I (WE) DO HEREBY CERTIFY THAT ALL PERSONAL PROPERTY TAXES HAVE BEEN PAID WHICH ARE DUE AND PAYABLE TO THE TOWN OF CHESTERFIELD AS OF THIS DATE AND THAT THE BUSINESS NAME IS THE SAME AS REPORTED ON MY SOUTH CAROLINA INCOME TAX RETURN.

Signature Title Date

Completed applications should be mailed to The Town of Chesterfield, Business License Department, P.O. Box 350, Chesterfield, SC 29709 or brought to our office located in Town, 112 Main Street, Chesterfield, SC. If you have questions concerning this application, please call us at 843-623-2131. Our FAX number is 843-623-2132. DO NOT MAIL CASH