

**City of Calhoun**  
**Post Office Box 248**  
**Calhoun, Georgia 30703-0248**  
**Occupation Tax & Regulatory Fee (Business License)**

Date \_\_\_\_\_

Check# \_\_\_\_\_ ID# \_\_\_\_\_

1. Name of Owner: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Daytime Phone #: \_\_\_\_\_

2. Name of Company: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Parcel # \_\_\_\_\_ Zoning \_\_\_\_\_  
Telephone #: \_\_\_\_\_ Local Contact Person: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Email renewal? \_\_\_\_\_

***All businesses within C-1 central business district and the Downtown Historic District must be approved by the Downtown Development Authority Director prior to a business license being issued.***

3. Type of Business: \_\_\_\_\_

4. Federal Tax I.D. or Social Security #: \_\_\_\_\_

5. E-verify # \_\_\_\_\_ Please complete and submit the [E-Verify and SAVE Affidavit](#)

6. GA Sales Tax ID # (Retailers or Resellers) \_\_\_\_\_

7. Do you, or have you ever owned a business in Georgia?  Yes  No

If Yes, please list the name, address and type of each business.

\_\_\_\_\_  
Business Name Address Type

\_\_\_\_\_  
Business Name Address Type

\_\_\_\_\_  
Business Name Address Type

\_\_\_\_\_  
Business Name Address Type

*Special Regulatory Licenses	Rate	All Other Businesses	
		By # of Employees	
Burglar & Fire Alarm Installers	\$ 100.00	1	\$ 75.00
Circuses, Carnivals and Public Exhibitions	200.00	2	148.00
Firearms Dealer	400.00	3-5	275.00
Locksmiths	100.00	6-9	500.00
Pawn Brokers	500.00	10-19	825.00
Shooting Gallery & Firearm Ranges	100.00	20-29	1,100.00
		30-49	1,250.00
Tattoo Artists	100.00	50-99	1,650.00
Amusement machine operators are required to obtain a regular business license and to provide a copy of a state permit and a contact person, if owned by a corporation.		100-199	2,070.00
		200-399	2,800.00
		400-499	3,165.00
		500-750	3,900.00
All new businesses must be inspected by Neal Russell (706-263-2299)		Over 750	4,275.00

8. Number of Employees: \_\_\_\_\_ (This includes owner and any part-time employee equivalent of full-time based on 40 hours per week.)

(SAVE and E-Verify affidavits must be signed and documentation attached)

**Oath:**

**"I solemnly swear that the above facts are true and that I am actively participating in the management of the business."**

\_\_\_\_\_  
Signature of Authorized Representative