

APPLICATION FOR BUSINESS LICENSE

TOWN OF CLOVER
 P.O. BOX 1060
 116 BETHEL STREET
 CLOVER, SC 29710
 PHONE: (803) 222-9495 FAX: (803) 222-6955
 www.cloversc.org

This Application with remittance in full must be completed and returned with full payment on or before 07/31/2021
 If no longer in business, please so indicate and return the application.

	<u>BUSINESS NAME AND MAILING ADDRESS</u>	<u>EMERGENCY CONTACT NAME AND ADDRESS</u>
NAME:	_____	_____
ADDRESS:	_____	_____
ADDRESS 2:	_____	_____
CITY, STATE, ZIP:	_____	_____
PHONE:	_____	TAX ID NUMBER: _____
LOCATION:	_____	OWNERSHIP TYPE: _____ (Corp., Individual, Partnership, etc.)
RESPONSIBLE PERSON:	_____	BONDING COMPANY: _____
BUSINESS CLASS:	_____	BOND NUMBER: _____
BUSINESS DESC:	_____	ACCOUNTANT: _____
OTHER LICENSE:	_____	OFFICE USE ONLY: CODE: _____ RESIDENT: _____ RENEW: _____ FAL: _____
EMAIL ADDRESS:	_____	
WEBSITE:	_____	

CALCULATION OF LICENSE FEE:	<u>LICENSE FEE</u>
Gross Income _____	(See rate schedule below) _____
	Late Payment Penalty _____
	Total Payment <u>_____</u>

Before calculating license fee please round your gross income amount up to the nearest thousand to get the correct fee.

_____ Signature	_____ Title	_____ Date
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<i>Calculation of license fee based on rate schedule on all rates</i>	Base Amount + (Rate * Number of units in range) = Total Fee								
	<table border="0" style="width:100%"> <tr> <td style="text-align:center"><u>FOR EACH</u></td> <td style="text-align:center"><u>RATE</u></td> <td style="text-align:center"><u>BASE AMOUNT</u></td> <td style="text-align:center"><u>TOTAL FEE</u></td> </tr> <tr> <td style="text-align:center">For Gross Receipts between 0.00 and 0.00</td> <td style="text-align:center">0.00</td> <td style="text-align:center">\$0.00</td> <td style="text-align:center">\$0.00 _____</td> </tr> </table>	<u>FOR EACH</u>	<u>RATE</u>	<u>BASE AMOUNT</u>	<u>TOTAL FEE</u>	For Gross Receipts between 0.00 and 0.00	0.00	\$0.00	\$0.00 _____
<u>FOR EACH</u>	<u>RATE</u>	<u>BASE AMOUNT</u>	<u>TOTAL FEE</u>						
For Gross Receipts between 0.00 and 0.00	0.00	\$0.00	\$0.00 _____						

PLEASE NOTE:
 ALL CONTRACTORS MUST SEND IN A COPY OF YOUR SC STATE CONTRACTORS LICENSE WITH BUSINESS LICENSE APPLICATION.