

**DEKALB COUNTY BUSINESS REGISTRATION
2021 RENEWAL APPLICATION**

330 W. PONCE DE LEON AVE. | DECATUR GA 30031 | (404) 371-2461 | FAX (404) 371-2946

BUSINESS INFORMATION					
RENEWAL TYPE <input type="checkbox"/> Initial <input type="checkbox"/> Subsequent		BUSINESS ACCOUNT #: EXCISE ACCOUNT #:		<input type="checkbox"/> CHECK HERE IF NO LONGER OPERATING DATE CLOSED: _____	
Legal/ Entity Name:			Trade Name:		
Phone:		Email:			
Physical (Location) Address (Street, City, State, Zip) P. O. Box Not Permitted					
					GA
BUSINESS OCCUPATION TAX					
1. GEORGIA GROSS RECEIPTS (2021 ESTIMATE)					
2. EXEMPTION \$20,000.00					
3. TAXABLE GROSS RECEIPTS <i>(Subtract line 2 from line 1, if negative enter \$0.00)</i>					
4. GROSS RECEIPT TAX NAICS: _____ <i>(Multiply line 3 by Rate, if more than \$50,000.00 Enter \$50,000.00)</i> Rate: _____					
5. <input type="checkbox"/> EMPLOYEE FEE <input type="checkbox"/> PROFESSIONALS ELECTION * Number of Employees or Practitioners <i>(At least one, include owner/operator)</i> <i>(Multiply # of Employees or Practitioners by Rate)</i> <i>Required E-Verify # if 10 or More Employees _____</i> Rate _____					
6. ADMINISTRATIVE FEE \$75.00 (Nonrefundable/ Nontransferable)					
7. FLAT TAX FEE \$50.00					
8. PRIOR YEAR BALANCE (Add lines 8a & 8b)					
2020 GROSS RECEIPT	(A) Gross Receipts	(B) Exemption	A - B = (C) Taxable Gross Receipts <i>(if negative enter \$0.00)</i>	(D) Gross Receipt Tax Rate	C x D = (E) Gross Receipt Tax <i>(Max \$50,000.00)</i>
ACTUAL		\$20,000.00			
ESTIMATED		\$20,000.00			
A. GROSS RECEIPTS TAX DUE (Actual Tax Due minus Estimated Tax Due)					
2020 EMPLOYEES/ PROFESSIONALS ELECTION*	(F) <input type="checkbox"/> EMPLOYEE (E) <input type="checkbox"/> PRACTITIONER (P)	(G) Number of Employees or Practitioner	(H) Employee or Practitioner Tax rate	G x H = (I) Employee or Practitioner Tax Due	
ACTUAL					
ESTIMATED					
B. EMPLOYEE/ PRACTITIONER TAX DUE (Actual Tax Due minus Estimated Tax Due)					
9. OTHER CREDITS/ ADJUSTMENTS					
10. SUB-TOTAL BUSINESS OCCUPATION TAX DUE (Add lines 4, 5, 6, 7, 8 & 9)					
11. LATE FILING PENALTY (Renewal postmark after February 1st)					
12. LATE PAYMENT PENALTY 10% of Occupation Tax Due subtotal postmark after April 15th (line 10)					
13. INTEREST 1% per month of Occupation Tax Due subtotal postmark after April 15th (line 10)					
14. TOTAL BUSINESS OCCUPATION TAX DUE (Add lines 10, 11, 12 & 13)					
ACCEPTANCE AND ACKNOWLEDGEMENT					
I certify that the 2020 ACTUAL figures are true and correct, and the 2021 ESTIMATE for this year is a good faith estimate or last year's actual.					
Print Owner's/ Authorized Agent Full Name			Signature		Date

*Professionals Election O.C.G.A 48-13-9 (C)(2). Flat Fee of \$400.00/ Professional Practitioner.

BUSINESS LICENSE RENEWAL AFFIDAVIT - 20_____

The undersigned, _____, being duly sworn, says the following:
(Licensee)

1. Have there been changes of ownership of the establishment? Yes No If yes, please explain

2. There have been no changes in any information and data contained in and furnished with my original DeKalb County Business Registration application.
3. In the past year, have you been convicted of or pleaded nolo contendere to a violation of any federal, state, or county law concerning crime of moral turpitude, misdemeanor, or violation of this Code directly relates to the business for which the certificate is sought? If yes, please explain the violation and provide the date of adjudication and the court of adjudication:

4. I am familiar with all laws, rules and regulations of the State of Georgia and all ordinances of DeKalb County covering the operation of the business establishment I will operate under this renewal.

I swear that all the information contained in the original application is true and I understand that such application is made a part of this renewal application and the renewal is based upon the information contained in the original application. DeKalb County sec. 15-45(a). A license issued pursuant to the provisions of this division shall be denied, suspended or revoked by the director if the licensee furnishes fraudulent or untruthful information in the original, renewal or transfer application for a license or omits information required in the original, renewal or transfer application for a license and for failure to pay all fees, taxes or other charges imposed under the provisions of this chapter.

Sworn to and subscribed to before me

Licensee's Signature

this _____ day of _____, 20____.

Notary Public

My commission expires:
(SEAL)