Subject: Occupational License Renewal Instructions

We hope this message finds you well.

Please find attached all the necessary paperwork required for the renewal of your occupational license. Please fill out the attached form in its entirety. Any unanswered questions or incomplete sections will result in the forms being returned to you. This will delay processing, and payments. Occupational renewals cannot be completed until all required information is provided.

It is essential to include your NAICS number in your submission. If you are unsure how to locate this number, follow these steps:

- 1. Visit www.naics.com
- 2. Click on the "NAICS Code Search" option.
- 3. Identify the sector that corresponds to your business. The first two digits of your NAICS code will be based on the sector you select.
- 4. Choose the description that best matches your business activities. The most updated 2022 code will be provided.

Example:

If I own a gift store, I would select the sector **Retail Trade (44-45)** and scroll to find the description that best fits my business, such as "Gift, Novelty, and Souvenir Retailers" (459420). Review the detailed breakdown of goods and services for that code. As this aligns with my business best, my NAICS code would be 459420.

Payment Options:

Card Payment:

If you prefer to pay with a card, email **grace4bogart@gmail.com** to request an emailed invoice. Payments will be processed via SwipeSimple. Please note there is a 3.5% interest fee which we cannot absorb or remove.

• Cash or Check:

If you prefer to pay with cash or check, include your payment with the returned documents.

Notarizing

If you need your documents notarized, there is a notary at City Hall.

Contact Information

If you have any questions or need assistance, please contact us at 770-725-7386 or grace4bogart@gmail.com.



Grace Martin | City Clerk City of Bogart 125 Main Street. | P.O. Box 206 Bogart, GA 30622 (770)-725-7386 | (678)-979-2224 www.cityofbogart.com

City of Bogart ♦ Occupational Tax Certificate Renewal

P.O. Box 206 • 125 Main Street • Bogart, GA 30622 • (770)725-7386 Occupational Tax Renewal- Please print neatly or type.



Renewal Deadline is June 30th

Business Informatio	<u>)n:</u>			
Business Name:				
Business Phone#:	susiness Name: Business Hours:			
Business Location:				
	(Must be a Physical Location	n- No Post Office	Boxes Accepted)	
City:	State:		Zip Code:	
	n be a physical address or Post C			
City:	State:		_ Zip Code:	
Email:				
Website:				
Number of Employees:				
Full-Time: Part-Time:				
Renewal Information	<u>on:</u>			
NAICS Number (www.naics.com)		Business Type**	
If applicable:			••	
FEIN Affidavits			Sales Tax ID	
	n 10 emplovees, mark exempt T	if a business has c	greater than 10 employees, mark nonexempt	
and provide the E-Verify n	umber below (4-6 digits, no lette	ers).	reater than 10 employees, mark honexempt	
□ Exempt	□Non-Exempt / E-VERIF	Y Number:		
	For Official Use Only. Plea			
Date Issued:	Occupation Tax Certificate Number #			
Receipt #:	Amount	t	Pro-rated Yes No	
This application is appro	oved / disapproved on the	day o	f, 20	
City Hall Official Signat				

SAVE AFFIDAVIT

By executing this affidavit under oath, as an applicant for a loan, grant, tax credit and/or other public benefit, as referenced in O.C.G.A § 50-36-1, administered by the City of Bogart, the undersigned applicant verifies one of the following with respect to my application for a public benefit" 1)_____I am a United States Citizen. 2)_____I am a legal permanent resident of the United States. ____I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. My alien number issued by the Department of Homeland security or other federal immigration agency The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A § 50-36-1(e)(1), with this affidavit. The Secure and Verifiable document provided with this affidavit can best be classified In making the above representation under oath, I understand that any person who knowingly and willfully makes a false fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A.§ 16-10-20, and face criminal penalties as allowed by such criminal statute. Executed this _____ day of ______, 20____ in _____(City), _____ (State). Signature of Applicant Printed Name of Applicant SUBSCRIBED AND SWORN BEFORE ME ON THIS

Delivery Preference for Your Renewed Certificate

Please 1	et us know how you would like to receive your renewed certificate by selecting one of the following options:
	Pick Up: Once City Hall has received your documents, processed your payment, and created your certificate, you will receive a call confirming that your certificate is ready for pick-up.
	Mailed: After City Hall has received your documents, processed your payment, and created your certificate, it will be mailed to the address provided at the top of the form, unless you indicate a different mailing address below: Address where you would like to receive your certificate:
	Emailed: Once City Hall has received your documents, processed your payment, and created your certificate, an electronic copy will be sent to the email address provided at the top of the form, unless you indicate a different email address below: Email address where you would like to receive your certificate:
Lookin	g Into Next Year:
Would y include	you prefer to have everything handled by Email? This would completely bypass the mailing system. If yes, please an active email address.
	Yes, Email: