

City Of Hanahan



Business License Application

The undersigned hereby requests a business license to operate a business or businesses within the City of Hanahan, S. C. It is understood that I must renew this each and every year that I operate a business within the City limits and it is my responsibility to see that this license is maintained. (Hanahan business licenses expire on April 30th).

FIRM NAME: _____ TAX CLASS: _____ LICENSE # _____

LAST NAME: _____ FIRST NAME: _____ M.I. _____

BUSINESS ADDRESS: _____ SSN: _____

CITY: _____ STATE: _____ ZIP: _____ BUS. PHONE: _____

MAIL ADDRESS: _____ OTHER PHONE: _____

CITY: _____ STATE: _____ ZIP: _____ HMBLDRS LIC: _____

BUSINESS TYPE: _____ HMBLDRS REG/CERT # _____

S.I. CODE: _____ FEDERAL I.D. _____ GEN. CONTR. LIC: _____

PLEASE CORRECT ANY ERRORS IN THE ABOVE INFORMATION AND ADD ANY MISSING DATA:

TOTAL GROSS INCOME LAST YEAR (BEFORE ANY DEDUCTIONS)..... \$ _____

MONIES MADE IN OTHER JURISDICTIONS

(ITEMIZE ON BACK OF FORM)..... \$ _____

TOTAL FOR HANAHAN LICENSE FEE..... \$ _____

PENALTY: _____: _____ \$ _____

LICENSE FEE CHARGE..... \$ _____

TOTAL LICENSE FEE..... \$ _____

This application is for: _____ New Business Beginning _____ License Renewal

I (we) do hereby certify that the information given in this application is true. That the GROSS INCOME is accurately reported or estimated for a new business without any unauthorized deductions. I am aware that should I discontinue conducting business I will at that time report any gross income not previously reported, and pay any remaining fees owed to the City. I also hereby authorize and release to the City of Hanahan, and consent to all information and records regarding my (our) criminal history if any.

APPLICANT SIGNATURE: _____ DATE: _____

CITY CLERK: _____

Make checks payable to: City of Hanahan