



TRAVELERS REST BUSINESS LICENSE APPLICATION

125 Trailblazer Drive, Travelers Rest, SC 29690

Phone (864) 834-8740

Email permits@travelersrestsc.com www.travelersrestsc.com

Application for current year only

Application Type: New Renewal Ownership Change Location Change Out of Business

Corporate Name: DBA Name:

Business address:

Phone Number:

Mailing/Billing Address (if different from physical address):

Email of Responsible Contact Person for Business License:

Ownership Type: Corp Individual Partnership LLC LLP

FEIN Number: NAICS Code: DHEC Permit #:

Computation of Fees

\*Gross income:

Indicate method used to determine the gross income (check one):

Actual (prior calendar year revenue) Estimated (new business) Projected (partial year) Per job

Contractors only: Jobsite Gross income:

Contractors SC LLR License #:

City of Travelers Rest Business License Fees

Table with 5 columns: Class, In-Town Rates (Income: 0-\$2000 Minimum Base Fee, Rate For Gross Receipts over \$2000 Per Thousand), Out-of-Town Rates (Income: 0-\$2000 Minimum Base Fee, Rate for Gross Receipts over \$2000 Per Thousand). Rows 1-8.

Every person engaged or intending to engage in any calling, business, occupation or profession, in whole or part, within the limits of the City of Travelers Rest, South Carolina is required to pay an annual license fee and obtain a business license as herein provided.

\*The gross income for business license purposes may be verified by inspection of returns and reports filed with the Internal Revenue Service, the South Carolina Department of Revenue, the South Carolina Insurance Commission, or other government agency.

The issuance of a business license is conditioned upon strict compliance with the ordinances of the City of Travelers Rest and failure to comply may result in revocation of license and possible monetary fines.

This is to certify that the above information is a true statement of the business done or transacted at or through the above location.

SIGNATURE OF APPLICANT AND TITLE DATE

\*\*FOR OFFICE USE ONLY\*\*

Business Class Business License # Zoning verified License Fee Amount Paid Date Paid Method of payment check cash