

Dear Business Owner:

Please find enclosed the 2010 Business License Application for the Town of James Island.

Please be advised of the rate schedule effective January 1, 2010:

- The rate schedule for all businesses within the Town limits shall be set at \$15.00 for the first \$2,000 of income and \$1.00 per thousand thereafter.*
- The rate schedule for all businesses having its main offices outside the Town limits shall be set at a rate of \$30.00 for the first \$2,000 of income and \$2.00 per thousand thereafter.*
- All taverns, bars, restaurants, cafes', eating and dining establishments shall pay an additional fee of \$100.00.*
- Any contractor or business which begins work within the Town limits without first obtaining a business license shall be subject to doubling of the business license fee.*
- The Town Clerk shall administer the enforcement of the Ordinance and is authorized to print or have such forms printed to effect the changes approved by Council herein.*

To avoid a penalty, please return the application and payment by March 31, 2010; please remit payment by check or money order. The Town of James Island will not accept payment in the form of cash or credit card payments.

The Town of James Island appreciates your business and look forward to serving you.

*Frances W. Simmons
Town Clerk*

Enclosures



BUSINESS LICENSE APPLICATION 2010

Type of Business: _____

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Mailing Address: _____

Telephone: _____ Fax: _____ E-Mail: _____

SSN: _____ Federal Tax ID: _____ State Retail Sales # _____

Enter Gross Receipts for the previous calendar year ending December 31, _____. If this is a New Business, enter anticipated Gross Receipts in the Town for the current year: _____

Computation of Fees:

Base Fee: _____	<input type="checkbox"/> New Business	<input type="checkbox"/> Corporation	<input type="checkbox"/> Location Change
X _____	<input type="checkbox"/> Renewal	<input type="checkbox"/> Individual	<input type="checkbox"/> Name Change
Subtotal: _____	<input type="checkbox"/> Update	<input type="checkbox"/> Partnership	<input type="checkbox"/> Contractor
Penalty: _____			

TOTAL FEES: _____

In accordance with the Business License Ordinance for the Town of James Island, I hereby make application for a Business License. **OATH OF APPLICANT:** "I hereby state under oath that the above information is complete, true, and correct. I am in a position to know the information is required and I am authorized to make such application."

Applicant Signature

Sworn before me this _____ day of _____ 2010 _____
Notary Public

My Commission Expires: _____

Customer Agreement/Service Contract Addendum: By signing this application for a Business License, he applicant agrees to pay all costs of collection of the applicant's unpaid bills. The Town of James Island has the right pursuant to the SC Setoff Debt Collection Act to collect any sum due and owned by the applicant through offset of the applicant's State Income Tax Refund. The applicant agrees to pay all fees and costs incurred through the Setoff process, including fees charged by the Department of Revenue, the Municipal Association of South Carolina, and the Town of James Island. If the Town of James Island chooses to pursue debts in a manner other than Setoff, the applicant agrees to pay the costs and fees associated with the selected manner as well. **Town of James Island, SC, 1238-B Camp Road, (P.O. Box 12240) James Island, SC 29422, (843) 762-7744; (Fax) 843: 762-4030; www.townofjamesislandsc.org**