OCCUPATIONAL TAX REGISTRATION APPLICATION PACKET

Please take care to ensure that the information for each checkbox below is sufficiently provided. The city will not accept incomplete applications.

☐ Completely filled out the application, nothing left blank.

☐ Completed private employer exemption form.

☐ Completed US citizenship verification affidavit form.

☐ A copy of lease required in you are leasing or proof of ownership (this applies for home based businesses and commercially located businesses).

☐ If home based business you must sign terms of use agreement.

☐ Signed understanding that the applicant is obligated to abide by the City of St. Marys sign regulations.

☐ Copy of driver’s license.

☐ Fee for occupational tax registration.

Special Requirements for Contractors: contractors will be required to present a valid contracting license and a valid business license of the same issuing state.

If you have any questions or concerns, or would like to schedule an appointment, please contact Community Development at 912-510-4032 or email planneroftheday@stmarysga.gov
Application for an Occupational Tax Certificate License

You **must complete all forms** attached for an occupational tax certificate license to be issued.

In this packet you will find two affidavits. These affidavits are in reference to immigration laws. We, the City of St. Marys, are **required by law** to collect these affidavits prior to issuance of your license.

If on the US Citizenship Verification affidavit you choose #2 (I am a legal permanent resident of the United States), or #3 (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), you will need to provide us a copy of documentation and another form of ID such as a driver’s license. Attached you will find a listing of secure and verifiable documents that are acceptable.

Your application will need to be completed and returned no later than Friday at 12 (noon). Review of application will be on Wednesday at 8:30am. Payment must be made when application is submitted. Once approved you will get a telephone call to come in and the license will be issued.

Cost of license: $33.00* **per** employee + $75.00 administration fee.  
*Fee prorated to $16.50 beginning July 1st.

License is issued per calendar year, January to December.

Acceptable payment: check, money order, cash, debit, or credit card. (I apologize but we do not accept Discover Credit Card.)

Please call 912-510-4032 should you have any questions.

Thank you!
City of St. Marys
Planning/Building/Cemetery Department
APPLICATION PROCESS

The Community Development Department reviews Occupational Tax Registration applications once a week, the application deadline for weekly review is Friday at 12:00 (NOON) for review the following Wednesday. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. The certificate received must be posted in a conspicuous place at your business establishment. Business licenses are non-transferrable.

EXPIRATION AND RENEWAL

The Occupational Tax Registration certificate expires December 31 of each year. Please contact the Community Development Department at (912) 510-4032 if your business closes, moves to another address, or if you do not wish to renew your certificate.

SIGN PERMITS

To erect a permanent or temporary sign at your business you will need a Sign Permit. The Sign Permit Applications are located online at: http://www.stmarysga.gov/department/community_development/document_center/index.php and at City Hall in the Community Development Department. Signs in the Historic District must be approved by the Historic Preservation Commission. Permits are reviewed as they are received and will be approved or denied within 30 business days. INCOMPLETE SIGN PERMIT APPLICATIONS WILL NOT BE ACCEPTED. Section 46-141 of the St. Marys Code of Ordinances states except as specifically excluded from the provisions of the ordinance, it shall be unlawful for any person to post, display, substantially change, or erect a sign in the City without first having obtained a Sign Permit.

ADDITIONAL REQUIRED LICENSES OR DOCUMENTS PER FEDERAL, STATE OR LOCAL CODE

- Affidavit Verifying Status - All business are required to complete form O5 included in the application packet.
- Day Care - If you plan to operate a school, nursery, or day care facility, you must apply to the Department of Human Resources Child Care Licensing. This agency will provide information regarding rules and regulations for child care licensing. (912) 691-6240
- Grocery & Convenience Stores — The Georgia Department of Agriculture inspects and licenses all food preparation facilities with no seating. Food storage facilities such as grocery stores and warehouses are also inspected. GA Dept. of Agriculture (404) 656-3627 or www.AGR.State.Ga.US
- Restaurants — Any food preparation facility with seating including inspections of Hotels, Motels, Bed & Breakfast, Personal Care Homes, and Restaurants are inspected by the Camden County Public Health Department. (912) 729-4554
- GA State Regulated Businesses – Trade/Professionals - For professionals such as electricians, plumbers, cosmetologists, etc. that have to pass State Certification boards and are licensed by the state. GA Secretary of State (404) 656-3900 or www.sos.stat.ga.us/ebd
- Taxicabs - Taxicab Services obtain permits through the Code Enforcement Officer. (912) 510-4098.
- Alcohol Licenses - Contact the City Clerk, to obtain an alcohol license in the City of St. Marys. (912) 510-4039

If you have any questions or concerns, or would like to schedule a meeting, please contact Community Development at 912-510-4032 or email planneroftheday@stmarysga.gov.
Please indicate the following information about your company or business. If you have more than one location in St. Marys, please complete a separate form for each location. If your company or business is incorporated, please furnish a copy of the incorporation papers as well as a list of the officers of your company.

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1. Name of Business:</td>
<td></td>
</tr>
<tr>
<td>2. Business Street Address:</td>
<td></td>
</tr>
<tr>
<td>3. Mailing Address:</td>
<td>Email Address:</td>
</tr>
<tr>
<td>4. City/State/Zip Code:</td>
<td>5. Business Phone:</td>
</tr>
<tr>
<td>6. Number of employees working 40 hours per week.</td>
<td></td>
</tr>
<tr>
<td>7. Part-time employees</td>
<td></td>
</tr>
<tr>
<td>8. TOTAL NUMBER OF EMPLOYEES</td>
<td></td>
</tr>
<tr>
<td>(If this is an existing business, please indicate the number of employees per location in St. Marys. If your main office is outside St. Marys, please indicate the actual number of employees working in St. Marys. For new businesses, please estimate the total number of employees of the calendar year.)</td>
<td></td>
</tr>
<tr>
<td>9. Types of Businesses to be conducted:</td>
<td></td>
</tr>
<tr>
<td>10. Dominant Line of Business:</td>
<td></td>
</tr>
<tr>
<td>(Which business is responsible for greatest income.)</td>
<td></td>
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<tr>
<td>Please give the following information for the person who will be responsible for any business conducted in St. Marys. Electrical, plumbing or mechanical sub-contractors, please give information based on qualifying agent.</td>
<td></td>
</tr>
<tr>
<td>11. Name of Owner/Agent:</td>
<td>12. Phone Number:</td>
</tr>
<tr>
<td>13. Home Address:</td>
<td></td>
</tr>
<tr>
<td>14. City/State/Zip Code:</td>
<td></td>
</tr>
<tr>
<td>The following information must be provided by those businesses, which are required by law to obtain them, or your local certificate cannot be issued or renewed.</td>
<td></td>
</tr>
<tr>
<td>15. Georgia Sales Tax ID:</td>
<td></td>
</tr>
<tr>
<td>16. Georgia License Type &amp; Number:</td>
<td></td>
</tr>
<tr>
<td>Please attach proof of above items, which apply.</td>
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</tr>
<tr>
<td>Please provide an alternate to contact in case of an emergency, or if the owner cannot be reached.</td>
<td></td>
</tr>
<tr>
<td>17. Name:</td>
<td>18. Phone Number:</td>
</tr>
<tr>
<td>19. Address:</td>
<td></td>
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</tbody>
</table>

The undersigned hereby stipulates and states that all statements given in this occupational tax registration form are true and correct and made for the purpose of registering the above business or company with the City of St. Marys, Georgia for occupation tax assessment purposes. The applicant further states that any statement herein, given falsely may result in the revocation of the occupational tax registration certificate or refusal to grant such certificate as well as possible civil penalties. In applying for this certificate, applicant agrees to abide by current zoning ordinances and regulations.

APPLICANT HEREBY AGREES AND CONSENTS PURSUANT TO PUBLIC LAW 93-579 ON THE PRIVACY ACT OF 1974 THAT THE DISCLOSURE OF INFORMATION OBTAINED IN THIS APPLICATION MAY BE SUBMITTED TO ANY AGENCY OF THE CITY, STATE, COUNTY, AND FEDERAL GOVERNMENTS FOR THE PURPOSES OF OBTAINING THE NECESSARY INFORMATION TO PROCESS THE APPLICATION.

Signature of Owner/Agent/Qualifying Agent  Date:  

IF YOU ARE NOT THE PROPERTY OWNER YOU MUST PROVIDE AN OWNER’S AUTHORIZATION LETTER/FORM OR A COPY OF YOUR LEASE TO OBTAIN AN OCCUPATIONAL LICENSE.

Approved: Date:  PAGE 2
COVENANTS OR DEED RESTRICTIONS
By the signature herein placed on this document, the Applicant for an Occupational Registration Tax (Business License) from the City of St. Marys, certifies that the facts of this application are not in conflict with any covenants or deed restrictions for the address(es) noted herein.

Applicant further certifies that the City of St. Marys will be held harmless from any legal action regarding any covenant or deed restriction not disclosed as part of this application for an Occupational Registration Tax (Business License).

SIGN ORDINANCE
Applicant further verifies he/she has been made aware of the sign ordinance for permanent and temporary signs, available on the City’s website at: https://library.municode.com/ga/st._marys/codes/code_of_ordinances?nodeId=PTIICOOR_CH46EN_ARTVISIRE, upon application for a local Occupational Tax Registration Certificate. I further acknowledge that signs in the historic district must be approved by the Historic Preservation Commission. I understand it is my responsibility to comply with the ordinances.

ST MARYS CODE OF ORDINANCES
Applicant further verifies he/she is aware that he/she must comply with all existing city ordinances. I understand it is my responsibility to comply with the ordinance and assure my business and employees likewise comply.

SIGNATURE: ________________________________________________________
PRINTED NAME: ______________________________________________________
ADDRESS: ___________________________________________________________
_______________________________________________________
DATE: ______________________________________, 20______________

NOTE: ALL APPLICANTS MUST COMPLETE THIS FORM REGARDLESS OF BUSINESS CLASSIFICATION.
By executing this affidavit under oath, as an application for an Occupational Tax Registration Certificate (an occupational tax registration certificate is required to operate a business in St. Marys) as referenced in O.C.G.A. § 36-60-6(d), from the ______________ (put your business name on the line) verifies one of the following by placing a check mark with respect to my application for the above mentioned document.

As of the below date I verify ONE the following (initial only one option):

(a)_____ The individual, firm or corporation employs less than eleven (11) employees **
(b)_____ The individual, firm or corporation employs eleven (11) or more employees**
(c)_____ The individual, firm or corporation employs less than one hundred (100) employees**
(d)_____ The individual, firm or corporation employs one hundred (100) or more employees**
(e)_____ The individual, firm or corporation employs less than five hundred (500) employees**
(f)_____ The individual, firm or corporation employs five hundred (500) or more employees**

To register with E-Verify go to www.uscis.gov or call 888-464-4218
(If you initialed (a) you are exempt from registering for E-Verify but you MUST SIGN THIS AFFIDAVIT acknowledging you are aware of the requirements. You may skip to the signature line below.)

**Effective January 1, 2012 you were required by law if you employed 500 or more employees to sign up for E-Verify.
**Effective July 1, 2012 you were required by law if you employed more than 100 employees to sign up for E-Verify.
**Effective July 1, 2013 you will be required by law to sign up for E-Verify if you employed more than 10 employees.

* If you employed less than 11 employees you are exempt from registering for E-Verify but you MUST SIGN THIS AFFIDAVIT acknowledging you are aware of the requirement. You may skip to the signature line below.

* If you placed a check marked, above, b), c), d), e) or f) you MUST provide, below, your “federal work authorization user ID number” and the date it was authorized. This is the number you were given when you registered E-Verify. Please note this is NOT the same number as your Federal Employee Identification number (FEI).

By submission of this affidavit the employer is stating registration and utilization of the federal work authorization program OR exemption in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6(a). The undersigned private employer attests that its federal work authorization user identification number and date of issuance are as listed below:

<table>
<thead>
<tr>
<th>Federal work authorization user identification number</th>
<th>Date number was authorized</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 the affidavit shall be guilty of a violation of O.C.G.A § 16-10-20, and face criminal penalties allowed by such statute.

Executed on the _____ day of __________, 20____ in ___________________________ (city)_________(state).

__________________________________________
Signature of Owner, Authorized Officer or Agent

__________________________________________
Printed Name and Title of Owner, Authorized Officer or Agent

Subscribed and sworn before me on
This day the _____ day of __________, 20____
Notary Public Signature/Commission Expires
"Secure and verifiable document" means a document issued by a state or federal jurisdiction or recognized by the United States government and that is verifiable by federal or state law enforcement, intelligence, or homeland security agencies. The term "secure and verifiable document" shall not include any foreign passport unless the passport is submitted with a valid United States Homeland Security Form 1-94, 1-94A, or I-94W, or other federal document specifying an alien's lawful immigration status, or other proof of lawful presence in the United States under federal immigration law, or a Matricula Consular de Alta Seguridad, matricula consular card, consular matriculation card, consular identification card, or similar identification card issued by a foreign government regardless of the holder's immigration status. Only those documents approved and posted by the Georgia Attorney General pursuant to subsection (g) of the Code section shall be considered secure and verifiable documents. [O.C.G.A. § 50-36-2 (b)(3)]

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- An unexpired United States passport or passport card
- An unexpired United States military identification card
- An unexpired driver's license or identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer.
- An unexpired tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer.
- An unexpired United States Permanent Resident Card or Alien Registration Receipt Card
- An unexpired Employment Authorization Document that contains a photograph of the bearer
- An unexpired passport issued by a foreign government, provided that such passport is accompanied by a US Department of Homeland Security Form 1-94, 1-94A, or I-94W, or other federal form specifying an individual's lawful immigration status or other proof of lawful presence under federal immigration law
- An unexpired Merchant Mariner Document or Merchant Mariner Credential issued by the US Coast Guard
- An unexpired FAST card, NEXUS card, or SENTRI card
- An unexpired driver's license issued by a Canadian government authority
- A Certificate of Citizenship (Form N-560 or Form N-561) or a Certificate of Naturalization (Form N-550 or Form N-570) issued by the United States Department of Citizenship and Immigration Services (USCIS)
- Certification of Report of Birth (Form DS-1350), a Certification of Birth Abroad (Form FS-545), or a Consular Report of Birth Abroad (Form FS-240) issued by the United States Department of State
- An original or certified copy of a birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal

For a more detailed listing of these secure and verifiable documents, including citations, refer to the “List of Secure and Verifiable Documents” posted on the Attorney General of Georgia website at http://law.ga.gov/immigration-reports.
By executing this affidavit under oath, as an applicant to an Occupational Tax License (type of public benefit), as reference in O.C.G.A. § 50-36-1, City of St. Marys (name of government entity), the undersigned applicant verifies one of the following with respect to my application for a public benefit: (place YOUR INITIALS on the applicable line below, initial one line only)

1. _____ I am a United States Citizen
2. _____ I am a legal permanent resident of the United States
3. _____ 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 is:

    _______________________________________________________________________

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided a copy of 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 as:

___________________________________________________________________________

(Example: Driver's License, Passport, Identification Card, etc.)

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 in ______________________________ (city) ____________________ (state).

__________________________________________
Signature of Applicant

__________________________________________
Printed Name of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON
THIS __________ DAY OF __________, 201_____

__________________________________________
Notary Public Signature
My Commission Expires:
CITY OF ST. MARYS, GEORGIA

OCCUPATIONAL TAX REGISTRATION APPLICATION

Planning & Building Department
418 Osborne Street - (912) 510-4032

Home office Terms of Agreement

You have requested approval for a business designated as a home office.

Approval for such business requires the following, as per Chapter 110, Article III, section 110-97

1. Shall be no sign or external indication of the business office.
2. No more than one vehicle is limited in the conduction of the business may be parked at home location. Signage on this vehicle is limited to the area of the driver and passenger front doors of said vehicle.
3. No material, other than office supplies may be stored on site.
4. The office may occupy no more than 25 percent of the floor area of the principal structure or accessory structure.
5. The office must be located in the principal structure.
6. Only resident of the dwelling may engage in work at the office.
7. Customers shall not visit the office.

A business license for such a business is subject to the same end-of-calendar-year renewal requirements as all other businesses.

If you are found to be violating the above ordinance, your business license is subject to suspension and/or termination.

By signing below, you affirm that you understand the above requirements for maintaining your registration with the City or St. Marys.

Should you have any questions on the above, please contact this office at 912-510-4032

___________________________________                        ______________________
Signature of Applicant                          Date of Agreement

___________________________________                        ______________________
Signature of CDD Staff Member Approval          Date of Agreement