



TOWN OF SPRINGDALE

2915 Platt Springs Road • Springdale, SC 29170
Office (803) 794-0408 • Fax (803) 791-0567
www.springdaleesc.com

APPLICATION FOR BUSINESS FOR YEAR _____

SEPARATE APPLICATIONS REQUIRED FOR EACH LOCATION

Business Located **WITHIN** the Corporate Limits

Date _____ New License OR Renewal License Rate Class _____

Name of Business [PLEASE PRINT]: _____

Owner/Local Responsible Official: _____

Mailing Address: _____ Email: _____

City: _____ State: _____ Zip: _____ Phone Number: _____

Business Location (If different): _____

City: _____ State: _____ Zip: _____ Phone Number: _____

Ownership Type: Proprietorship LLC Corporation

Business Description: _____

Social Security Number: _____ OR Federal ID Number: _____

Contractor's License Number (If applicable): _____ Expiration Date: _____

A. Preceding Year Gross Receipts (Estimate for new business): \$	*Allowable Deductions: Any Business conducted outside the Town of Springdale corporate limits for which a licensing fee was paid to another jurisdiction.
B. Allowable Ordinance Deductions*: \$	
Net Receipts [A - B]: \$	

*****You must provide documentation in order to claim a deduction*****

Please note: Gross receipts may be subject to audit by the business license official

I attest that all of the information submitted on this form is true and correct. The Town of Springdale will not be held liable for any omissions or misrepresentations herein. I am familiar with the Town of Springdale Code of Ordinances chapter 11 entitled *Business Regulations*, specifically section 7 which provides for penalties and the revocation of this license for making false or fraudulent statements in this application.

Applicant* (PRINT)

Applicant Signature

Date

OFFICIAL USE ONLY

License #: _____

Processed by: _____

Date Issued: _____

Receipt #: _____

Payment type: _____

Town Zoning Compliance Yes No

NOTE: PENALTIES ACCRUE AT 5% OF THE UNPAID FEE FOR EACH MONTH AFTER APRIL 15

- | | |
|-------------------------|----------|
| 1. Coin Oper. Mchs. | \$ _____ |
| 2. Base License Fee | \$ _____ |
| 3. Schedule Rate Charge | \$ _____ |
| 4. Total Fee (1+2+3) | \$ _____ |
| 5. Penalty ___% | \$ _____ |
| 6. Total Amount Due | \$ _____ |

Rates

Class	Income Less than \$2,000 Minimum (Base Fee)	Income Greater than \$2,000 Rate per Thousand or Fraction Thereof
1	\$42.00	\$1.68
2	\$49.00	\$1.47
3	\$56.00	\$1.47
4	\$56.00	\$1.61
5	\$63.00	\$1.68
6	\$70.00	\$1.75
7	\$77.00	\$1.82
8***	\$56.00	\$1.54

Rate is for contractors. Please call Town Hall at (803)794-0408 for other class 8 business rates

Declining Rates

Unless otherwise specifically provided, declining rate applies in all classes for gross income in excess of \$1,000,000 as follows:

Gross Income	Percent of Rate for each additional \$1,000
\$0 - \$1,000,000	100%
\$1,000,001-\$2,500,000	95%
\$2,500,001-\$5,000,000	90%
\$5,000,001-\$7,500,000	85%
\$7,500,001-\$10,000,000	80%
\$10,000,001-up	75%

For questions about obtaining a business license, please contact the Business License Official at:

(803)794-0408 or jboyes@springdalesc.com