01BUS2N

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| Renewal license is due  upon receipt. Penalties  will apply May 1. | | | | **HORRY COUNTY  BUSINESS LICENSE DEPARTMENT**  Post Office Box 1275, Conway, South Carolina 29528  Telephone (843) 915-5620   |  |  | | --- | --- | | ***RENEWAL* APPLICATION FOR LICENSE YEAR** |  |   Licenses are mailed weekly after approval of renewal. | | | | | | | | Account # | | | |  | | | | |  |  |
| CID # | | | |  | | | | |  |  |
| Keyed By | |  | | | | | | | |  |
| [www.horrycountysc.](http://www.horrycountysc.)gov | | | |  | | | | | | | | | |  |
| PLEASE - VERIFY ALL PREPRINTED INFORMATION. Make Applicable Changes PRINT ONLY. | | | | | | | | | | | | | | | | | | | | | | |
| Business Owner:  **\*See back for change of Location address** | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | Location of Business: | | | | |  | | | | | | | | | |
|  | | | | | | | | | |
| Type of Business: | | | | | |  | | | | | | | | |
| Business Phone #: | | | | | |  | | | | | | | | |
| SS #: | | |  | | | | SS #: | | |  | | |  | |
|  | | | | | | | | *Federal ID #:* | | |  | | | | | | | | | | |
|  | | | | | | | | | S C Contractors License #: | | | | | |  | | | | | | |
| Email Address: | |  | | | |  | | | S C State Retail License #: | | | | | |  | | | | | | |
| **BUSINESS LICENSE FEE CALCULATION:** | | | | | | | | | | | | | | | | | | | | | |
| NAICS Code: |  | | NAICS Description: | |  | | | | | | | | | | | | | Rate Class: |  | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  | | --- | --- | --- | | **GROSS INCOME Sales/Receipts for the Calendar or Fiscal Year** |  | **as Reported to IRS** | | + | $ |  | (a) |
| (If not in business for 12 months, estimate income for current license year based on 12 months) **Estimated \_\_\_ Yes \_\_\_ No** |  |  |  |  |
| MINUS: Income that is reported to another city/county **where** **a license is obtained**  **GROSS INCOME FIGURE MUST BE PRESENT FOR PROCESSING.** | - | $ |  | (b) |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | GROSS INCOME for License Fee Computation |  |  |  |  | | = | $ |  | (c) |
| If line C is over $50,000, do all steps in order to compute amount due. |  |  | (Round to nearest thousand) |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Step 1 | | Amount from line C $0 to $50,000 is covered by the Base Fee | | | | | | | | | |  | | | | | | | Base Fee | | | | = $ | | | | | |  | | (1) | | | |
| Step 2 | | Next amount from Line C **between** $50,000 and $1 mil | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | x | | | = $ | | |  | | | | (2) | |
| Step 3 | | Next amount from Line C **between** $1 mil and $2 mil | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | x | | | = $ | | |  | | | | (3) | |
| Step 4 | | Next amount from Line C **between** $2 mil and $3 mil | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | x | | | = $ | | |  | | | | (4) | |
| Step 5 | | Next amount from Line C **between** $3 mil and $4 mil | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | x | | | = $ | | |  | | | | (5) | |
| Step 6 | | Next amount from Line C **between** $4 mil and $5 mil | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | x | | | = $ | | |  | | | | (6) | |
| Step 7 | | Next amount from Line C **between** $5 mil and $50 mil | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | X | | | = $ | | |  | | | | (7) | |
| Step 8 | | Next amount from Line C that is **over** $50 million | | | | | $ | |  | | | | | ÷ 1000 = | | |  | | | | | x | | | = $ | | |  | | | | (8) | |
| Step 9 | TOTAL (add Steps 1 through 8) | | |  |  | | | | | | | | | | | **SUB TOTAL LICENSE FEE** | | | | | | | | **$** | | |  | | | | | (9) | | |
| **AMUSEMENT MACHINES:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Business where machines are located***: Gross Receipts $ | | | | | | | |  | | | First $50,000 = $ | | | | | | | | |  | | | | | | **Fee Due:** | | | |  | | |
| ***Owner of Machine (only):*** Number of Machines | | |  | | | x $ | | | |  | | | = $ | |  | | | PLUS $ | | |  | | | | | **Fee Due:** | | | |  | | |

**BILLIARD / POOL TABLES (OWNER OF TABLE ONLY):**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Gross Receipts $ |  | First $50,000 = $ |  | + # of Tables |  | @ $ |  | EA. = Fee Due: $ |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Penalty Rates*** | |  |  | | | **Mail form along  with check or money order to the above address** | **RECAP OF FEES DUE** | | | | | | | |  |
| *May 1 - 31* | *=* | 10% |  | | | A. | | License Fee Due (from Step 9) | | | | $ | |  |
| *June 1 - 30* | *=* | 20% |  | | | B. | | Amusement Machines (Fee Due) | | | | $ | |  |
| *July 1 - 31* | *=* | 30% |  | | | C. | | Billiard Tables (Fee Due) | | | | $ | |  |
| *August 1 - 31* | *=* | 30% |  | | | D. | | **Plus penalty (see rates)** | | | | $ | |  |
| *Sept. 1 - 30* | *=* | 30% |  | | | E. | | **Reinstatement Fee (after Sept. 30)** | | | | $ | |  |
| *Oct. 1 - ???* | *=* | 30% | Plus $100.00 | | | **Total License Fee Due** | | | | | |  | |  |
| *New Owner / Corp. must complete a new application when*  *ownership changes.* ***DO NOT*** *use old owner’s renewal application.* | | | | | | | | |  | | | | | | | |
| **Renew online at** [**www.horrycountysc.**](http://www.horrycountysc.)**gov or** | | | | | | | |
| **Make check payable to: Horry County Treasurer** | | | | | | | |
| *I certify under oath that the information given in this license application is true, that the gross income is accurately reported, or estimated for a new business, without any unauthorized deductions, and that all assessments, fees, licenses, property taxes, and any other charges due and payable to the County have been paid. I have obtained County permits and am in compliance with all regulatory codes of Horry County. I understand the County ordinance provides for penalty and license revocation for making false or fraudulent statements on this application.* | | | | | | | | | | | | | | | | | |
|  | | | | | |  |  | | | | |  |  |  | |  | | |
| *SIGNATURE* | | | | | |  | PRINT SIGNATURE | | | | |  | TITLE |  | | DATE | | |

**SEE BACK OF RENEWAL FOR IMPORTANT INFORMATION**

**IMPORTANT INFORMATION**

*Renewals can be mailed to the address listed at the top of the application.*

* **“Gross Income”** (to report on line”a”) pertains to *all* revenue received (or accrued) for a full calendar year and as is reported to the IRS based upon the previous year return **prior to any deductions** or expenses such as cost of goods sold, overhead, etc.
* All **New businesses** are required to have a business license prior to operation in Horry County. Each must estimate their probable **“Gross Income”** (for line “a”) beginning from the start date of the business until April 30th. For the second year of operation, the business must again estimate the probable “**Gross Income**” (line”a”) to cover a full year (12 months) of activity. **All additional income over the estimated gross income as filed must be reported, and the additional fees paid, prior to the expiration of the license year for which the estimate was given or penalties will apply.**
* **“Exempt Income”** (line “b”) pertains only to revenue that is generated in another county or municipality of which a business license was obtained and the revenue amount was reported. All remaining income (regardless of where it is generated) is reported to Horry County, as per your physical business location address, and is subject to the business license fees.
* **“Change of Address**” If business location has changed, you must first obtain zoning approval for the new location. A change in address must be reported in writing to Horry County within ten(10) days after the business has moved to a new location. You can contact Zoning at 843-915-5340. Failure to obtain approval of the County for change of address, shall invalidate the license.
* **“Email Address”** In order to save county resources we would like to be able to correspond with your business by e‑mail. Please verify the pre‑printed e‑mail address on this application. If no e‑mail address is listed please provide one.

**Business Closure Information:**

|  |  |
| --- | --- |
| **Business Name:** |  |

This business is no longer located and/or operating in Horry County as of                             . Please close this business license account.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| SIGNATURE |  | PRINT |  | TITLE |  | DATE |

**Please note, if your business:**

**1) Has Federal ID# or FEIN, and**

**2) Files tax returns under that number, and**

**3) Is located and/or operating in the unincorporated area of Horry County**

**Then the business is required to keep a current Horry County business license.**