

HALL COUNTY BUSINESS LICENSE APPLICATION

2875 Browns Bridge Rd
Gainesville, Georgia 30504
770-531-6815

P O Box 1435
Gainesville, Ga. 30503
Fax 770-531-4953

Business Name _____ Business Phone (____) _____

Business Address _____
Number & Street Name City State Zip

Business Mailing address _____
If different from above

E-Mail Address _____

Total number of people working in business, full time, or part-time equaling full time _____

E-Verify Number _____ Authorization date from E-Verify _____

Beginning Date of business from **THE ABOVE** address _____

Federal Employer ID Number (FEI #) _____ Georgia Sales & Use Tax # _____

Business Type (be very specific as to what you will be doing): _____ State License number _____
If applicable

OWNERSHIP

Name of Owner if Sole Proprietorship, or name of officer if Corp. or LLC Home Address City State Zip

Home Phone number

Cell Number

Fax Number

Additional Owner's name if partnership Home Address City State Zip

Home Phone number

Cell Number

Fax Number

TYPE OF OWNERSHIP Sole Proprietor Partnership Corporation LLC

If corporation or LLC, what is the EXACT, complete name as it is registered with the Georgia Secretary of State's Office:

Corporate name

Corporate Address

City

State

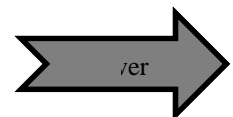
Zip

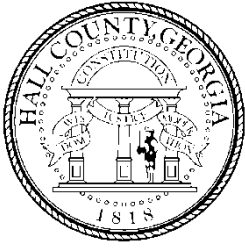
IMPORTANT ALONG WITH THIS APPLICATION, PLEASE BRING **ORIGINAL** GOVERNMENT ISSUED PHOTO ID ON ALL OWNERS AND/OR PRESIDENT OF THE CORPORATION (corporate officer **MUST** be on Georgia Secretary of State's Website), GREEN CARD (if applicable), OCCUPANCY PERMIT SHOWING THE BUSINESS PHYSICAL ADDRESS (Issued by the Planning & Zoning/Building Inspection Depts.) AND ANY OTHER REQUIRED DOCUMENTATION. ALL THESE ITEMS MUST BE SUBMITTED BEFORE ANY BUSINESS LICENSE CAN BE ISSUED.

For office use only

BL# _____ CO# _____

OVER





HALL COUNTY BUSINESS LICENSE DEPT

P O DRAWER 1435
GAINESVILLE, GA. 30503

Phone 770-531-6815

2875 Browns Bridge Rd

Fax 770-531-4953

Affidavit Verifying Legal Status Of Applicant for Hall County Business License

Please complete highlighted sections

By executing this affidavit under oath, as an owner/applicant for a Hall County Business Occupation Tax Certificate (Business License), I do swear the following, with respect to my application for a Hall County Business License for _____

(business name)

AND _____

(business owner)

I certify that I am a: (please check one of the following)

1) United States citizen

OR

2) A legal permanent resident of the United States, 18 years of age or older; OR I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older and lawfully present in the United States*. My country of citizenship is: _____

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 Code Section 16-10-20 of the Official Code of Georgia.

Signature of Owner

date

Printed Name of Owner

date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

DAY OF _____, 20____

Notary Public

* O.C.G.A. 50.36.1(e) (2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number.