

**CITY OF GAINESVILLE
OFFICE OF ADMINISTRATIVE SERVICES**

**300 HENRY WARD WAY / P.O. BOX 2496
GAINESVILLE, GA 30503
TELEPHONE: 770-533-5842
FACSIMILE: 770-535-5636**

APPLICATION CHECKLIST

- Certificate of Occupancy OR Home Office Affidavit
- Completed Application
- City of Gainesville Status Verification Affidavit (SAVE Affidavit)
- Other documents (if applicable): State License, Food Service Permit Phone # 770-531-3973, Dept of Agriculture Certificate Phone # 770-535-5955, Health Dept Permit, State Sales Tax Number, Federal Id Number

**PROCEDURE FOR OBTAINING BUSINESS/OCCUPATION TAX
CERTIFICATE [BUSINESS LICENSE]**

1. Contact the Gainesville Planning & Zoning Department to secure the appropriate document for your particular business situation. This normally consists of:
 - A. Home Office Affidavit [Required For Operating an In-Home Office]
 - B. Certificate of Occupancy [Required For All Commercial Locations]

This document is required and must be obtained before the applicant can receive the Business/Occupation Tax Certificate to open for business.

**GAINESVILLE PLANNING & ZONING DEPARTMENT
311 HENRY WARD WAY [ZIP CODE 30501] / P.O. BOX 1435 [ZIP CODE 30503]
GAINESVILLE, GA
TELEPHONE: 770-531-6570**

3. When you are ready to apply for your **Business/Occupation Tax Certificate**, bring either the **Home Office Affidavit** or the **Certificate of Occupancy** to the **Office of City Finance/Business-Occupation Tax**. After you have completed the return (application), signed a status verification document and have paid the fee, your tax certificate should arrive at your mailing address in approximately seven (7) to ten (10) days.
4. Depending upon your type of business, you may be required to have certain other documentation prior to the issuance of a Business/Occupation Tax Certificate.

A. Federal Employer Identification Number (F.E.I. #)

The U.S. Internal Revenue Service issues an **Identification Number (E.I.N.)** to any business that: **1)** has employees, **and/or 2)** plans to establish itself as a corporation, partnership, or sole proprietorship (some exceptions may apply). Provide this number on your City of Gainesville Business/Occupation Tax Return at the time of application.

The telephone number to call to obtain this number or for questions concerning it is **1-800-829-4933** or online at www.irs.gov.

B. Georgia Sales Tax Number

The State of Georgia levies a sales and use tax on the retail purchase, retail sale, rental, storage, use, or consumption of tangible personal property and on certain services described in the **Georgia Code**. It is the responsibility of any business owner making transactions subject to this tax to obtain a Georgia Sales and Use Tax Number.

Provide this number on your City of Gainesville Business/Occupation Tax Return at the time of application.

The telephone number to call to obtain this number or for questions concerning it is **(706) 389-6977**. The Internet Website is: www.etax.dor.ga.gov. Select **Business Taxes, Sales tax** and then select **On-line Business Registration**.

C. State Licenses/Certification

Certain professions are required to obtain licenses/certifications from the State of Georgia. A few examples of these professions are: Plumbers, Electricians, Heating/Air Conditioning Contractors, Attorneys, Physicians, Cosmetologists and Salons. Call **PHONE #478-207-2440** for further information.

Documentation of this certification must be presented, and the license or certificate number must be provided on the Business/Occupation Tax Return.

CITY OF GAINESVILLE

BUSINESS/OCCUPATION TAX (BUSINESS LICENSE) NEW BUSINESS

OFFICE USE ONLY:

Account No.:

SIC Code:

Business Trade Name: _____

Business Address

Location: _____

City: _____ State: _____ Zip: _____

Phone: _____ DBA: _____

Corp. Name & Address: _____

Contact: _____ Title: _____ Phone: _____

(THIS PERSON'S NAME WILL APPEAR ON THE LICENSE)

Emergency Contact: _____ After Hours Phone: _____

(For Police & Fire Use)

Mailing Address

Name: _____

Address 1: _____

Address 2: _____

Address 3: _____

City: _____ State: _____ Zip: _____

Owner's Address

| Name | Address | City | State | ZIP |
|------|---------|------|-------|-----|
|------|---------|------|-------|-----|

Are you a U.S. Citizen? Yes No

Dominant Line of Business: _____

(WHAT DO YOU DO OR WHAT SERVICE DO YOU PROVIDE?)

_____ Partnership _____ Sole Ownership

_____ Georgia Corporation _____ Other State Corporation

Date Opened: _____ Solid Waste Company: _____

Georgia Sales Tax No.: _____ Home Business: Yes No

Certificate of Occupancy No.: _____ Fed. I.D. or S.S. No.: _____

(REQUIRED)

State Board Certificate No.: _____ Expiration Date: _____

