

City of Cartersville

Occupational Tax Certificate

This application must be completed and returned with applicable fees to:
City of Cartersville Planning and Development

P. O. Box 1390
Cartersville, GA 30120
770-387-5600
Fax 770-387-5605

Make Checks Payable to the City of Cartersville

1. Name of Business _____

Local Business Address _____

Mailing Address, if Different _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

2. Owner of Business _____

Home Address _____

3. Manager of Business _____

Home Address _____

4. Description of business to be conducted _____

NAICS # _____ Sales Tax ID # _____

5. Number of employees: Full Time _____ Part Time _____

SIGNS FOR YOUR BUSINESS REQUIRE A PERMIT

6. Will a new sign be placed at this location? YES _____ NO _____

I certify that the foregoing information is true and correct. I understand that falsification of any part of this application could cause denial or revocation of the certificate.

Date: _____ Signature _____

FOR OFFICE USE ONLY
Zoning District _____ Allowable Use as Described YES _____ NO _____
Approved _____ Disapproved _____

O.C.G.A. §50-36-1(e){2} Affidavit

By executing this affidavit under oath, as an applicant for an occupational tax certificate, alcohol license, or other public benefit as referenced in O.C.G.A. § 50-36-1, from the City of Cartersville, the undersigned applicant verifies one of the following with respect to my application for a public benefit.

- 1) _____ I am a United State citizen
- 2) _____ I am a legal permanent resident of the United States (Have a permanent resident card)
- 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 (ie. Work Visa)

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 at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1{e}{1),with this affidavit.

The provided secure and verifiable document can best be Classified as _____

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 the
____ Day of _____, 20____

Notary of the Public

My Commission Expires _____

City of Cartersville Occupational Tax Certificate Fees

Number of Fulltime Employees <i>Not Including the Owner</i> <i>2 part time = 1 fulltime</i>	Fee for New Business	Fee for New Business if opening after July 1 st
0-1	\$90.00	\$45.00
2-5	\$180.00	\$90.00
6-10	\$240.00	\$120.00
11-50	\$335.00	\$167.50
51-100	\$405.00	\$202.50
101-200	\$675.00	\$337.50
201-500	\$1,015.00	\$507.50
501-1,000	\$1,685.00	\$842.50
1,000+	\$3,000.00	\$1,500.00

Other Types of Licenses:

Peddlers License Fees:

\$25.00 Background check done at the City of Cartersville Police Department

\$10.00 Car Decal

\$50.00 Peddlers License Fee

Total= \$85.00

Precious Metals Permit:

\$25.00 Background check done at the City of Cartersville Police Department

\$30.00 Precious Metals Permit Fee

Total= \$55.00

Sec. 4.23. • Home occupations.

A home occupation as defined by this chapter shall be governed by the following requirements:

1. Only residents of the dwelling may be engaged in the home occupation.
2. The home occupation shall be clearly incidental to the residential use of the dwelling and shall not change the essential residential character of the building.
3. There shall be no display stock in trade, or commodity sold on the premises, and no mechanical equipment used except such as is commonly used for purely domestic household purposes.
4. Only one (1) point of business sign, not exceeding *two* (2) square feet in size, motionless, non-lighted, and attached to the principal building, shall be permitted, and no advertising signs shall be permitted.
5. Use of the building for a home occupation shall not exceed thirty (30) percent of one (1) floor of the principal building (excludes a family day care use).
6. No alterations inconsistent with the residential use of the building shall be permitted.
7. The occupation shall not constitute a nuisance in the neighborhood.
8. No accessory buildings or outside storage shall be used in connection with the occupation.
9. Instructions in music shall not create sound at an audible level which may be a nuisance to neighboring properties.
10. Vehicles used primarily as passenger vehicles only shall be permitted in connection with the conduct of the home occupation.
11. No commercial equipment such as landscaping equipment or machinery associated with construction, grading, or hauling shall be allowed to be stored or parked on the property.
12. The following and similar uses shall be considered customary home occupations: art instruction, beauty shop (with no more than one (1) stylist), doctor's office, drafting, dressmaking, insurance agency, manufacturing agent, music instruction, notary of the public, photography, real estate agency, tax consultant, or *any* other home office consisting of a personal computer, FAX machine, phone, or *any* other accessory office equipment typically used to establish a home office.
13. All home occupations must have an occupational tax certificate.

CHECKLIST FOR OCCUPATIONAL TAX CERTIFICATE (BUSINESS LICENSE)

Steps for Getting an Occupational Tax Certificate in an Existing Building

1. Obtain Occupational Tax Certificate Application from Planning & Development Department at 2nd Floor, City Hall, 10 North Public Square, on the City of Cartersville Website, or call 770-387-5600
2. Please call the Planning Department to verify zoning of your building.
3. Please call the Bartow County Tax Commissioners office to verify all occupation, specific, special or ad valorem taxes due to the city by such person for any previous year are paid. Have the tax commission office staff sign off on the sign off sheet.
4. If utilities need to be turned on please come to the Planning Department and ask for a temporary utility signoff sheet. Once that is complete, turn the sheet in to Customer Service on the 1st floor of City Hall and pay deposits. Customer Service 770-387-5607
5. Call the following departments for inspections of your commercial building and have them sign for their department on the Final Inspection Sheet
 - Fire Department: 195 Cassville Rd 770-387-5635
 - Water Department: 148 Walnut Grove Rd 770-607-6291
 - Building Department: 10 N. Public Square 770-387-5600If you are opening a restaurant or gas station more inspections maybe requires Please see Planning Department staff for more information.
6. Return the completed paperwork and final signoff sheet to the Planning Department. There are notaries you may use free of charge in the office, but do not sign the forms until you are in their presence.
7. If modifications (renovation) of the building are required, obtain Building Permit from Planning & Development Department. Fees are based on valuation of the renovation. Depending upon the situation, plumbing, electrical, or HVAC permits may be required. State licensed contractors are required to pull the permits. The Building Official and Inspector will inform you of the scheduling of inspections. If the building is in a Historic District a Certificate of Preservation (COP) maybe required from the Historic Preservation Commission. Planning Staff will review any changes to determine if a COP is required.

CITY OF CARTERSVILLE

SIGNOFF FOR TEMPORARY UTILITIES

This must be signed before any utilities can be turned on.

Building Inspection-Inspectors
10 North Public Square
770-387-5600

APPROVAL _____ DATE _____

Fire Department - Inspectors
195 Cassville Road
770-387-5635

APPROVAL _____ DATE _____

Water Department-Chattie Agan
Walnut Grove Road
770-607-6291

APPROVAL _____ DATE _____

BUSINESS NAME _____

ADDRESS _____

NOTES _____

**CITY OF CARTERSVILLE
FINAL INSPECTIONS REQUIRED FOR ISSUANCE OF
OCCUPATIONAL TAX CERTIFICATE**

On completion of a building before occupancy, a final inspection must be done before a Certificate of Occupancy can be issued. Please see City Building Official for appropriate departments to contact.

Building Inspections

10 N Public Sq. 770-387-5600

APPROVAL _____ DATE _____

Fire Department - Inspectors

195 Cassville Road 770-387-5635

APPROVAL _____ DATE _____

Bartow County Tax Office

135 W. Cherokee Avenue 770-387-5111

APPROVAL _____ DATE _____

Water Department - Chattie Agan

Walnut Grove Road, 770-607-6291

APPROVAL _____ DATE _____

Bartow County Water Department- Roger Ellis

50 Nelson Street, 770-387-5169

APPROVAL _____ DATE _____

Gas Department - Gary Riggs

4 Cook Street, 770-387-5642

APPROVAL _____ DATE _____

Police Department

178 West Main Street, 770-607-6197

APPROVAL _____ DATE _____

Bartow County Health Department

100 Zena Drive, 770-387-2614

APPROVAL _____ DATE _____

Department of Agriculture

770-535-5955

APPROVAL _____ DATE _____

Business Name: _____

Address: _____

P.O. Box 1390
 Cartersville, GA 30120
 770-387-5635
 770-387-7413 (Fax)

New Business
 Life Safety Checklist

Name of Facility _____ Date _____

Address _____

Emergency Contact Name and Phone# _____

	Y	N	N	Remarks
Street Address Posted (4" min.)				
Fire walls or partitions have no				
Exit are Marked & Signs Lit				
Emergency Lighting Operable				
Exit Doors are Clear & Unlocked				
Electrical Room Clear &				
No Extension Cords				
AU electrical switches and outlets				
No open empty spaces in panel box				
Compressed gas cylinders are				
Portable Fire Extinguishers Maintained &				
Gas fired water heater has min. of 3'				
Storage- not blocking exits, panel				
Sprinkler System Maintained & Tagged				
Hood System Maintained & Tagged- (Every				

A Knox Box will be required for all new businesses, changes of ownership, and renovations over 50% before a business license can be issued. It is the responsibility of the applicant to install the Knox Box per the city ordinance. The box may be ordered online at www.knoxbox.com or a paper order form can be requested from the Fire Prevention Division at Cartersville Public Safety Headquarters 199 Cassville Rd. Cartersville, GA. 30120 or Phone 770-387-5635.

Fulfilling the requirements of this form does not ensure that a business license will be issued. This form is meant to help new business owners with the Cartersville Fire Prevention Division inspection process and is not an all inclusive form.

10 or less employees

Private Employer Exemption Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm, or corporation employs ten (10) or fewer employees and is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6.

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____ of _____, 201____ in _____(City), _____(State).

Printed Name of Exempt Private Employer (Business Name)

Signature of Exempt Private Employer or Authorized Officer or Agent

Printed Name and Title of Person Executing Affidavit

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____DAY OF _____, 20 ____ .

NOTARY of the PUBLIC

My Commission Expires:

More than 10 employees

Private Employer Affidavit of Compliance Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Private Employer (Business Name)

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on ____ of _____, 20 ____ in _____ (City), _____ (State).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE ____ DAY OF _____, 20 ____.

NOTARY PUBLIC

My Commission Expires:
