

City of Maysville

Post Office Box 86 226 South Main Street Maysville, GA 30558
Telephone 706-652-2274 Fax 706-652-3511

Dear Business Customer:

Please complete the enclosed registration application for an "Occupational Tax Certificate" for _____. It is extremely important that the information you provide is correct and accurate so that the cost of your certificate will be computed correctly.

Also, enclosed is an Affidavit Verifying Status to be completed and returned with your application that is required by O.C. G. A. Section 50-36-1 for a City Public Benefit.

Because of changes in the (H.B.87) Law you must return the completed application form and Affidavit Verifying Status to the City of Maysville in person as required by O.C.G.A. Section 50-36-1 for Public Benefits. You must also bring a secure and verifiable document for identification.

The non-payment of this occupational tax by April 1, _____ will prohibit a business to continue its operation until all such outstanding balances are paid.

If you no longer have your business open please write "business closed" on the application and return it to me so that our records can be updated.

THE OCCUPATION TAX SHALL BE LEVIED ACCORDING TO THE NUMBER OF EMPLOYEES OF THE BUSINESS AS FOLLOWS:

#EMP	TAX DUE	#EMP	TAX DUE
0-3	\$ 40.00	16-20	\$ 88.00
4-6	\$ 49.00	21-25	\$103.00
7-10	\$ 58.00	26-30	\$118.00
11-15	\$ 73.00	31-35	\$133.00

\$5.00 ADMINSTRATIVE FEE ALREADY INCLUDED

Should you have questions please call city hall at 706-652-2274.

Sincerely,

Barbara Thomas
City Administrator/City Clerk

CITY OF MAYSVILLE

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: _____

Georgia Sales Tax No: _____

Home Business: _____

Yes

No

State Board Certificate No.:

Fed. I.D. or S.S.

No.:

Affidavit
Verifying Status for City Public Benefit

By executing this affidavit under oath, as an applicant for a City of Maysville, Georgia Business License or Occupation Tax Certificate, or other public benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my application for a City of Maysville, Business License or Georgia Occupational Tax Certificate for _____, [Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1) _____ I am a United States citizen

OR

2) _____ I am a legal permanent resident 18 years of age or older or I am an otherwise 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.*

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 Applicant: _____ Date _____

Printed Name: _____

E-Verify Number _____

**SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE**

_____ DAY OF _____, 20____ * _____ Alien Registration number for non-citizens

Notary Public: _____

My Commission Expires: _____

*Note: 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. Qualified aliens that do not have an alien registration number may supply another identifying number below :
