# CITY OF FOREST PARK

## DEPARTMENT OF FINANCE

# BUSINESS TAX DIVISION

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## INSTRUCTION MANUAL

City of Forest Park
Business Tax Division
745 Forest Parkway
Forest Park, Georgia 30297
(404) 366-4720 or fax (404) 608- 2344
www.forestparkga.org

# CITY OF FOREST PARK

**Department of Finance**
745 Forest Parkway
Forest Park, Georgia 30297
(404) 366-4720 fax (404) 608-2344
www.forestparkga.org

**Michael Blandenburg**, Director

## Occupational/ Business Tax Certificate Application

Welcome to the City of Forest Park. We look forward to working with you. If you are a new business in the City of Forest Park you are required to have a current occupational/ business tax certificate in order to conduct business within city limits. Below are some items we recommend each new business should look into to ensure your business is in compliance with City Ordinances. Please refer to our website for additional information.

**Step 1:** Please contact the Zoning Department at 404-608-2300 with your business address and dominant business activity to determine if your business location is in the proper district for your type of business. This will help reduce applications denied due to improper zoning.

**Step 2:** Complete and submit all required forms and documentation to the Business License Department to obtain your Occupational/ Business Tax Certificate. Please contact the Business License Department at 404-366-4720 or email at tbyrd@forestparkga.org to determine if additional documentation is required for your business. All forms and documents are also on our website at www.forestparkga.org under the Business section. To acquire an occupational tax certificate please follow the instructions below. The items listed below are needed to complete an occupational tax certificate application.

**Step 3:** The Fire Marshal's Office will contact you to schedule an appointment for an inspection upon receiving paperwork. Upon approval from the Fire Marshal, the Zoning Department will contact you to schedule an appointment for the Building Inspector to conduct the final inspection. The Certificate of Occupancy is issued and the original copy is delivered to the Business License Department. The Business License Clerk will advise the applicant of the cost of the license and license may be picked up at City Hall or mailed.

**Required for all applicants:**

- ☐ New Occupational Tax Certificate Application
- ☐ Affidavit Verifying Status Form
  - #1 U.S. Citizens: Georgia Driver's License, Passport, or Military ID
  - #2 Legal Permanent Residents: Georgia Driver's License and either Permanent Resident Card or Employment Authorization Card
- ☐ E-verify Affidavit
- ☐ Copy of applicant's identification
  - A valid/ current passport, Georgia Driver's License or Military ID
- ☐ Payment for the correct fee amount
  - Checks made payable to City of Forest Park

**Optional depending on business type:**

- ✓ Copy of Health Inspection report with the grade and/ or fire inspection report
  - Restaurants, Tattoo Parlors, & Hotels
- ✓ Copy of Professional License
  - Only if applicable: Attorney's, Physicians, CPA's, Cosmetology, etc.
- ✓ Copy of Georgia Agriculture Certificate
  - Only if applicable: Convenience Stores, etc.
- ✓ Copy of the Certificate of Incorporation
  - Only needed if business is a Corporation or LLC

# Internal Revenue Service
# United States Department of the Treasury

www.irs.gov/businesses/small/

A new business venture usually will need to obtain an **"Employer Identification Number" (EIN)**, also known as a **Federal Taxpayer Identification Number**, which is issued by the Internal Revenue Service (IRS). In most instances, this is the first application an entrepreneur may need to complete. The EIN could be required on many of the subsequent applications completed when starting a business.

The IRS offers a wide range of information for the entrepreneur of the established business owner. Through the "Small Business/ Self Employed" section of the IRS website, a business owner can obtain information on the following:

- Checklist for Starting a Business
- Selecting a Structure
- Writing a Business Plan
- Copyright and Patent Issues
- Licenses and Permits
- Tax Assistance

Internal Revenue Service
Website: www.irs.gov/businesses/small/
Main Telephone Number: 1-800-829-1040
EIN Information Telephone Number: 1-800-816-2065
EIN Information Telephone Number: 1-800-829-3676 (forms only)
Non-profit Status (501c) Telephone Number: 1-800-829-5500

## GENERAL INFORMATION FOR BUSINESS LICENSE/OCCUPATIONAL TAX CERTIFICATE

Welcome. We are pleased that you are considering the City of Forest Park for your business. Should you have any additional questions, please call the Business Licensing Division at (404) 366-4720.

Come grow with us...*City of Forest Park, Georgia*.... *City of Pride & Progress*


***Tiffanie Byrd***
**Business License Division**

**Phone: 404-366-4720**
**Fax: 404-608-2344**
**Email:**
***tbyrd@forestparkga.org***


### WHY DO BUSINESS IN FOREST PARK?

Forest Park is Clayton County's largest city located only 9 miles south of Atlanta. The City enjoys access to Interstate Highways I-75 and I-285 and Hartsfield International Airport. Interstate Highways I-675 and I-20 are also within close proximity to Forest Park.

Our goal is to provide a networking opportunity for business owners to grow their businesses and the community. We strive to keep you informed of programs and other opportunities that helps promote and supports our business community.

All businesses operating within the city limits of Forest Park are required to have an Occupational Tax Certificate (also referred to as a "Business License") or register with the City. The City of Forest Park's Business Tax Division will assist you in making sure that your business complies with all applicable City Ordinances. An overview of the **City Code of Ordinance** provides important information on operating a business within city limits.

Businesses will be subject to occupational taxes based upon taxable gross revenue. You are urged to contact our office by phone, e-mail, fax or mail if you have questions concerning a new or existing Business Tax Account. All documents needed to be submitted at the Business License Department located at City Hall, 745 Forest Parkway, Forest Park, GA 30297. Application processing hours: Monday, Wednesday, or Friday, 8:00am until 5:00 pm or at the City's One Stop Shop for permits and licensing located in the Planning, Building and Zoning Department, 785 Forest Parkway, Forest Park, GA 30297, Tuesday 8:30 am until 11:30 am and Thursday, 1:30 pm until 4:30 pm.

| **Occupational Tax Class** | **Tax Rate on Gross Receipts** |
|---|---|
| **Section Title 3, Chapter, City Code (Location in Municode)** | **Per Appendix A Per $1,000.00 of gross receipts)** |
| Tax Class 1 | .00081 |
| Tax Class 2 | .00101 |
| Tax Class 3 | .00121 |
| Tax Class 4 | .00140 |
| Tax Class 5 | .00110 |

General Profitability Ratio/ Tax Class are the tax rate, which is determined by the profitability ratios in combination with gross receipts for each business, trade, profession or occupation.

## INFORMATION FOR NEW BUSINESSES:

There is an annual seventy-five ($75.00) Administrative fee (**Non-refundable**) for each new Occupational Tax Application. Applicants shall provide an estimate of their gross receipts and number of employees for the rest of the year. The estimate will be changed to actual figures when renewed for the following year. Click here for a new commercial Business License Packet. Access to view your Business License Application Status is available at **http://www.egovlink.com/forestpark/action.asp**. If additional information regarding resources is needed to start a business, we recommend individuals to contact the Small Business Development Center located at 2000 Clayton State Blvd, Morrow, Georgia 30260.

**NOTE: Your business cannot open or begin operation until you have received your PAID Occupational Tax Certificate. Once received, the current year's PAID Certificate must be posted in plain view of the public.**

**HOW TO APPLY-REQUIRED DOCUMENTATION:**
A Business Tax Application can be obtain online or in person. All documents need to be submitted at City of Forest Park Business License Department located at 745 Forest Parkway, Forest Park, Georgia 30297.

Required for all new commercial applicants:

- New Business Tax Application
- M.A.R.C. Form
- SAVE Affidavit**
- Zoning Verification
- Fire Inspection
- Building Inspection Checklist
- State Identification (List of Secure & Verifiable Documents)
- New Business License Checklist
- Professional Practitioner Registration Form (if applicable)
- E-verify Affidavit*

Additional information may be required depending on business type:

- Health Inspection Report with Grade
- Professional State License
- Georgia Department of Agriculture Certificate
- Georgia Department of Banking and Finance Certificate

*Employers with 11 or more employees (or full-time equivalent), as required by O.C.G.A (d), must register for a Federal Work Authorization User Identification Number at **http://www.dhs.gov/e-verify**. This number is between 4-6 digits with no letters.

****Note:** O.C.G.A. § 50-36-1(e)(2) requires 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," permanent legal residents must also provide their alien registration number. Copies of verifiable documents are required when submitting this form-**PHOTO ID REQUIRED**

- ***If you are a U.S. Citizen and if you have an Affidavit of Residency form on file***, you do not need to re-submit this year.
- ***If you are not a U.S. Citizen***, you must complete the Affidavit Verifying Status (SAVE) form and submit every year.

**POSTING OF BUSINESS LICENSE CERTIFICATE:**
All Business License Certificates must be displayed on the premise of the place of business. It must be posted in a conspicuous place and open to public viewing.

**PROFESSIONAL LICENSURE:**
Your license status must be active and you must provide us with a copy of your State Board Certification. You should contact the Secretary of State's Office for Professional Licensing Board at (678) 207-1300 or apply online at **www.sos.ga.gov**.

There are businesses which require additional application documentation. The Business License Department can advise you further if these documents are needed for your business.

**RESTAURANTS, FOOD SERVICE, TATTOO BUSINESSES, MEDICAL OFFICES:**
All service establishments must obtain a food service permit from the State Environmental Health Department or Department of Agriculture (depending upon business).

Clayton County Health Department
685 Forest Parkway
Forest Park, Georgia 30297
(404) 366-6230
Website: www.claytoncountypublichealth.org

Georgia Department of Agriculture
9 Martin Luther King, Jr. Dr., S.W.
Atlanta, Georgia 30334
(404) 656-3600
Website: www.agr.georgia.gov

**NON-PROFIT ORGANIZATIONS:**
All Non-profit organizations are required to register with the City before operations may begin. Copies of State and Federal registration documents need to be submitted with application.

**HOME OCCUPATION (OFFICE SPACE ONLY):**
The City allows certain business activities to conduct in residential areas with some restrictions. Home Occupations must be conducted entirely within the home and cannot be evident from outside, and may use no more than 25% of the square footage. Home occupations can involve family members residing in the dwelling, and no materials or equipment maybe stored outside. Applicant must provide **a current utility bill** (electric, gas, water), **with your name & and home address on the bill, a copy of your GA driver's license or GA identification card**, also having the same address. We are not allowed to issue any business licenses to people using P.O. boxes or multi-family dwelling. Applications are available at City Hall (404) 366-4720.

Required for all new Home Occupations Licenses:

- Home Occupation Application
- Affidavit Verifying Status Form
- Current Georgia Driver's License
- Letter from Owner (Tent Applicants Only)
- Copy of Lease (Tenant Applicants Only)
- Two Current Utility Bills
- Home Occupation Ordinance (Signed)

**INFORMATION REGARDING ANNUAL RENEWAL OF LICENSE:**
Occupational Tax Certificates are issued on a calendar yearly basis and must be renewed each year by October 1st. A 10% Failure to file late fee, Ord. Sec. 3-3-18 is assessed if renewal is not returned by November 15th and interest on delinquent occupation taxes, regulatory fees and administrative fees at a rate of 1.5 percent per month. No business license shall be issued or renewed unless all City taxes, sanitation fees and other assessments have been paid prior to payment of the annual license fee. Businesses who have not filed by the due date will receive a Failure to File Notice and cited by Code Enforcement.

The Business Tax Division will mail you a Renewal Application each year; however, **IT IS YOUR RESPONISBILITY TO BE AWARE OF, AND TO COMPLY WITH THE RENEWAL PROCEDURE.** If you did not receive a notice by October 1st, please download a blank renewal form (with mandatory documents) to complete and submit. If you have any questions, contact the Business Tax Division at (404) 366-4720 or email: **tbyrd@forestparkga.org**. Please notify us of any changes with your business, i.e.; name and/ownership change, location change, partnership, corporation, business closing, etc. All changes should be submitted in writing.

- Occupational Tax Renewal Checklist
- Occupational Tax Renewal Packet

**INSTRUCTIONS ON ACCOUNT CHANGES OR CLOSING AN ACCOUNT**
If you are no longer in business or do not wish to renew your license with the City of Forest Park, please indicate using a Close of Business Form.

- Notification of Closing Business Form

A business license certificate is **not transferable.** If there is a change in your business name, mailing address or site address, you must fill out a new application and zoning verification form, please download the forms or contact the Licensing Division to obtain these forms.

If the business is under new ownership, licenses are non-transferable (It would be necessary for the new owner to contact the City of Forest Park).

**FIRE MARSHAL'S INSPECTION REQUIREMENTS:**

An inspection is required for every business and below is a general listing of requirements from the Fire Marshal's Office. The Fire Marshal will contact you to set up an appointment. **Do Not** contact the Fire Marshal's Office (this may take a few days)

Commercial Fire Letter Inspections Letter- Click Here

**ALCOHOL LICENSE:**

Any establishment selling alcohol within the City of Forest Park must obtain a Business License prior to engaging in the sale of alcohol. Licenses for alcoholic beverages, pawnshops, and other privilege licenses are subject to additional requirements. Additional information is available at City Hall, or call 404-366-4720. Requirements can be found in the City Code of Ordinance.

**CARNIVALS, AMUSEMENT, TENT SHOWS, ETC:**

Please see Carnival Instructions.

**TAXI PERMIT:**

For more information or to make an appointment, please contact the Forest Park Police Department at 404-366-7280.

**YARD SALE PERMIT:**

The City requires a special sign and permit for yard sales. Only **three (3) yard sales allowed a year** from January thru December. Sales are limited to a consecutive three day period per resident for $5.00 and can be obtained at city hall (404) 366-4720.

- Yard Sale Regulations

**HOTELS & MOTELS:**

Hotels must file their taxes by the 20th day of the month following the month of collection with the form provided below. City of Forest Park has a 3% Lodging Tax.

*Hotel/Motel Tax Filing Form

**NOTARY & WITNESS SERVICES:**

The City of Forest Park provides notary services to assist the public with filing documents requiring notarization by the City. These services are provided for the following approved fees:

| | |
|---|---|
| City of Forest Park Residents (Identification needed) | Free |
| Outside Residents | $2.00 per document, $2.00 per signature |

**FOREST PARK BUSINESS COALITION:**

We encourage every business within the community to join the Forest Park Business Coalition Association. Our goal is to provide a networking opportunity for business owners to grow their businesses and the community. We strive to keep you informed of programs and other opportunities that helps promote and supports our business community. Click here to download a form to enroll.

**WHY JOIN THE FOREST PARK BUSINESS COALITION?**

Here are several great reasons who you should join the FPBC:

**Community Involvement:**

- The coalition's purpose is to provide the business community an opportunity to network with individuals from the surrounding business community helping each other grow and thrive.
- Being involved in the Forest Park Business Coalition provides an opportunity for our business community to come together staying connected with our local government, and developing ways to continue to flourish.

The meetings are held the third Tuesday of the month from 11:30 to 1:00 p.m. at Clayton County Community Services Authority located at 1000 Main Street in Forest Park. Everyone is welcome!

People wishing to file a complaint about a business located in Forest Park should contact the Metro Atlanta Better Business Bureau.

## FAQ'S: MOST OFTEN ASKED QUESTIONS AND ANSWERS

**Q. What do I need in order to apply for a Business License?**

**A**. Please bring picture identification. If your business is incorporated, you must have proof of incorporation.

You will be asked to complete a New Business Tax Application, which included a request, for an estimate of gross revenue from your business start dates to the end of the year.

**Q. Where do I get my Tax Identification Number?**

**A**. Please contact the Internal Revenue Service- Apply for an Employer Identification Number (EIN) Online.

Obtain your Georgia State ID Tax ID number from the Georgia Tax Center.

**Q. Where can I register a Business Name (Doing Business Name As")?**

A. Please contact the Georgia Office of the Secretary of State.

**Q. What is my business tax based on?**

**A**. Your business tax is based upon the estimated gross receipts (For the first year only). Thereafter it is based on your company's actual gross receipts.

**Q. How long does it take to receive my Business License Certificate?**

**A**. Turnaround time varies for each applicant. Several factors that are in involved may prolonged the issuance of your License. We are honored that you have chosen Forest Park as your destination to grow your business and we will try to make sure you receive it in a timely manner.

# FOREST PARK CITY SERVICES

| | |
|---|---|
| City Manager | (404)366-4720 |
| City Hall | (404)366-4720 |
| Public Works | (404)608-2310 |
| Police | (404)366-7280 |
| Fire | (404)608-2382 |
| Recreation | (404)366-2908 |
| Planning, Building & Zoning | (404)608-2300 |

# BUSINESSES THAT REQUIRE A STATE LICENSE THROUGH THE SECRETARY OF STATE

Architects/Interior Designers

Athlete Agents

Athletic Trainers

Auctioneers

Barbers

Cemeteries

Chiropractic Examiners

Conditioned Air Contractors

Cosmetologists

Dentists

Dietitians

Dispensing Opticians

Electrical Contractors

Engineers and Land Surveyors

Foresters

Funeral Service

General and Residential Contractors

Geologists

Hearing Aid Dealers

Landscape Architects

Librarians

Licensed Practical Nurses

Low Voltage Contractors

Massage Therapists

Nursing Home Administrators

Occupational therapists

Optometrists

Pharmacists

Physical Therapists

Plumbing Contractors

Podiatrists

Private Detectives

Professional Counselors, Social Workers, and Marriage and Family Therapists

Psychologists

Registered Nurses

Security Guards

Speech Language Pathologists and Audiologists

Used Motor Vehicle Dealers and Parts Dealers

Utility Contractors

Veterinarians

Water/Wastewater Treatment Plant Operators

** Information pertaining to State Licenses can be located at www.sos.ga.gov

# *City of Forest Park Fire Marshal's Office*
# *(404) 608-2374*

A fire/line safety inspection that is required by law shall be completed before a Certificate of Occupancy and a Business License will be issued. The Fire Marshal's office will contact you once your application is received.

## Frequently asked questions

***Will I have to install a sprinkler system in the building?***

It depends, if the building changes Occupancy Types per *2012 International Fire Code 102.3* (Change of use of occupancy) Defined by the *2012 edition of NFPA 101-* (Life Safety Code) the structure will be required to be retrofitted with an approved sprinkler system designed and installed per NFPA 13. Contact the Fire Marshal's Office for any questions.

***Will I have to install a fire alarm in the building?***

It depends, not all occupancies are required to have a fire alarm. This requirement will be determined by requirements of *the 2012 edition of NFPA 101* (Life Safety Code) Contact the Fire Marshal's Office for any questions.

***Can I purchase the portable fire extinguisher from a department or home improvement store?***

Yes, but the portable fire extinguisher will have to be inspected and tagged by a company that is certified and licensed by that is certified and licensed by the GA. State Fire Marshal's Office. A list of these companies can be found on the internet at http://oci.ga.gov/.

***Violations frequently found during an inspection:***

- ✓ All portable Fire Extinguishers are required to be inspected and tagged by a licensed company on an annual basis.
- ✓ All Exit/Emergency lights must function in normal and emergency modes.
- ✓ Gas appliances (furnaces & water heaters) require a 36 inch clearance.
- ✓ Electrical panels require a 36 inch clearance.
- ✓ All electrical outlets and light switches require covers.
- ✓ Missing or damaged ceiling tiles should be replaced.
- ✓ Gasoline or LP gas should NEVER be stored within the structure.

Thank you for helping to make our city a safe place to live and visit.

**Fire Marshal- Major David Halcome**
Office- 404-608-3274
David.halcome@fpfd.net

**BUILDING INSPECTION CHECKLIST FOR BUSINESS LICENSE REVIEW/REQUEST**

**This Checklist is to be used for building inspections by code enforcement officers when a request is made in regard to review of existing or request for new business licenses. The form is designed to prompt the inspector to observe for the conditions listed and respond in the "yes" column if everything is in order. Any "no" answer should be accompanied by an explanation in the "comments" column to assist in identifying and correcting the problem.**

| Item | YES | NO* | Description | Comments (Be Specific!)** |
|---|---|---|---|---|
| **BUILDING EXTERIOR** (Including corridors and passageways to exits, including the exit) | | | | |
| 1 | | | Are stair, landings and handrails in place on both sides of staircase and in good condition and fastened securely? Are stair treads in good condition? | |
| 2 | | | Is the building address or identification clearly visible? | |
| 3 | | | Are exterior lights in working order? | |
| 4 | | | Does the building appear to be in good repair? | |
| 5 | | | Are exits properly marked and illuminated? Are passageways adequately illuminated with all bulbs working? | |
| 6 | | | If emergency lights are installed, are they functional? | |
| 7 | | | Is building free from signs of vandalism? | |
| 8 | | | Are exterior walls free from cracks or other damages? | |
| 9 | | | Are windows free from cracks or broken panes? | |
| 10 | | | Has vegetation been cut back from the building? | |
| 11 | | | Is the building free from signs of exterior damage? | |
| **BUILDING** | **INTERIOR** | | | |
| 1 | | | Have all electrical circuits been identified? | |
| 2 | | | Are all electrical panels secured? | |
| 3 | | | Are all electrical switches and receptacles in good repair? | |
| 4 | | | Is proper clearance provided around all heating equipment? | |
| 5 | | | Are furnace/boiler rooms kept locked and free from combustible storage? | |
| 6 | | | Do heating and cooling thermostats appear to be in good working order? | |
| 7 | | | Is building free of any leaks in exposed heating/cooling/plumbing pipes or lines or in areas where pipes run through the walls or foundation? | |
| 8 | | | Are all toilets operating properly? | |

| | | | | |
|---|---|---|---|---|
| 9 | | | Are all faucets operating properly? Any leaks? | |
| 10 | | | Is building free of any problems with sink or tub water pressure? | |
| 11 | | | Are all drains draining properly? | |
| 12 | | | Is building free of cracks in tile or other floor finishes? | |
| 13 | | | Are interior walls and ceilings free from cracks or other damage? | |
| 14 | | | Do kitchens (if applicable) and bathrooms have proper venting? | |
| 15 | | | Is water heater operating properly? | |
| 16 | | | Is building free of any cracks on toilet tank, bowl or on sinks? | |
| **GENERAL SAFETY, CODE/ZONING CONSIDERATIONS** | | | | |
| 1 | | | Does location meet current parking requirements? | |
| 2 | | | Does location meet current signage requirements? | |
| 3 | | | Does location meet current setback/buffer requirements? | |
| 4 | | | Are all uses at the location legal and/or conforming? | |
| 5 | | | Have outdoor grassy/turf areas been inspected for holes, exposed roots, etc. and documented? | |
| 6 | | | Are paved surfaces, including parking lots and sidewalks free of lifts or cracks, etc. and in safe condition? | |

* "NO" answers must be accompanied by comments that explain corrective action needed. Code Enforcement Officers should report deficiencies directly to Business Licensing Division.

**Location: _____

Report completed by: _____ (print name) Date:_____

Title:_____

Acknowledgement by Business Owner/Applicant:

Print Name:_____ Signature_____ Date:_____

# Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

Issued July 10, 2013 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA"), as amended by Senate Bill 160, signed into law as Act No. 27, (2013), provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(g). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- An unexpired United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A.§ 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired passport issued by a foreign government, provided that such passport is accompanied by a United States Department of Homeland Security ("DHS") Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual's lawful immigration status or other proof of lawful presence under federal immigration law1 [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

- An unexpired Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Certification of Report of Birth issued by the United States Department of State (Form DS-1350) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Certification of Birth Abroad issued by the United States Department of State (Form FS-545) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Consular Report of Birth Abroad issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- An original or certified copy of a birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A.§ 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

1 Senate Bill 160 (Act No. 27), effective July 1, 2013, limited the use of passports issued by foreign nations to satisfy the requirements for submission of secure and verifiable documents to only those passports submitted in conjunction with a United States Department of Homeland Security ("DHS") Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual's lawful immigration status or other proof of lawful presence under federal immigration law.

City of Forest Park

# ONE STOP SHOP

## EXPEDITED BUSINESS LICENSING

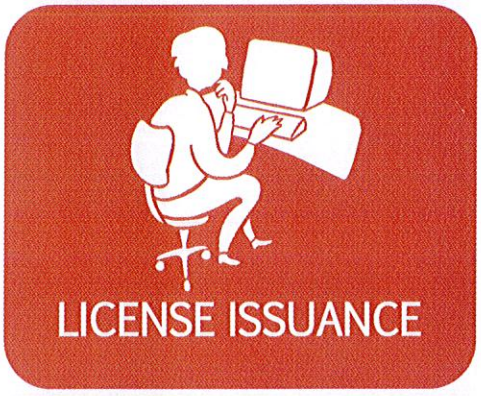
**Every Tuesday 8:30 am to 11:30 am & Thursday 1:30 pm to 4:00 pm**

Please visit the Business License Department at City Hall at all other normal business hours

ZONING VERIFICATION

FIRE INSPECTION

BUILDING INSPECTION



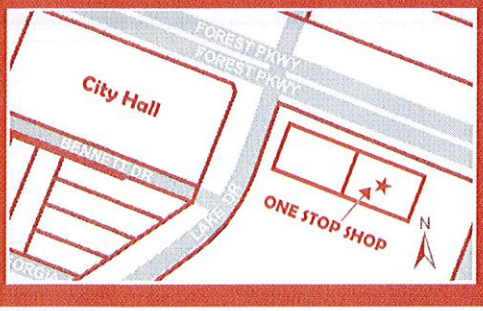
LICENSE ISSUANCE

## Located across from City Hall at the

Planning, Building & Zoning Dept. | 785 Forest Parkway, Forest Park , GA

**For your convenience, we now offer:**

- Combined services in one location
- Same day scheduling of inspections




**Questions? Please Contact Business Licensing at (404) 366-4720**

745 FOREST PARKWAY, FOREST PARK, GA 30297
CITY HALL, DEPARTMENT OF FINANCE: (404) 366-4720
FAX: 404-608-2344
CALENDAR YEAR_____

LICENSE# _____
DATE RECEIVED_____

# APPLICATION FOR NEW BUSINESS TAX/ REGISTRATION

PO BOX 69
FOREST PARK, GA 30298-0069

**PLEASE READ CAREFULLY BEFORE COMPLETING**
**(NO P.O. BOXES PLEASE)**

**NOTE**: Please type or print clearly and complete all information and attach all required documentation. Required Documentation includes: State Issued Identification. The City of Forest Park Business Tax Department will calculate fees and will bill you accordingly. For fee schedule contact the Business Tax Department or the website www.forestparkga.org. **IMPORTANT**: If you are licensed by the county or state, a copy of your license(s) must be submitted with this application.

**OWNERSHIP TYPE ( CIRCLE ONE): SOLE PROPRIETOR / PARTNERSHIP / CORPORATION/ NON-PROFIT/ L.L.C (ATTACH CORPORATION DOCUMENTS)**

**ESTIMATED GROSS DOLLAR VOLUME** _____ **NUMBER OF EMPLOYEES** _____ **DATE COMMENCED** _____
***(NOT REQUIRED BY NON-PROFIT OR TAX EXEMPT ORGANIZATIONS)**
**AMENDED APPLICATION** _____

## PLEASE COMPLETE ALL INFORMATION

**BUSINESS/ CORPORATION/ ORGANIZATION NAME**

_____

**DOING BUSINESS AS NAME**_____

**BUSINESS/ ORGANIZATION LOCATIONADDRESS**_____

**SUITE UNIT/ APT**_____ **CITY**_____ **STATE** _____ **ZIP CODE**_____-_____

**TELEPHONE**_____ **FAX**_____ **CORPORATE TELEPHONE**_____ **WEBSITE**_____

**EMAIL ADDRESS** _____ **REGISTERED AGENT**_____ **AGENT'S NUMBER**_____

**MAILING ADDRESS (IF DIFFERENT FROM BUSINESS LOCATION)**_____

**CITY** _____ **STATE** _____ **ZIP CODE** _____-_____

**DOMINANT BUSINESS/ ORGANIZATION ACTIVITY (TYPE OF BUSINESS):**

_____

**BUSINESS OWNER INFORMATION (To be completed by owner, if partnership or incorporated, List officers name and home address on separate sheet. (No P.O. Boxes Please)**

**NAME OF APPLICANT** _____ **TITLE** _____

**RESIDENCE ADDRESS** _____ **CITY**_____ **STATE**_____ **ZIP CODE**_____-_____

**TELEPHONE**_____ **OTHER**_____ **EMAIL** _____

**SOCIAL SECURITY#**_____ **FEDERAL ID (FEIN)**_____ **GA SALES TAX ID NUMBER**_____ _____

**DRIVERS LICENSE #** _____ **STATE**_____ **E-VERFYING #**_____ **CONTROL #**_____

**EMERGENCY CONTACT OTHER THAN YOURSELF**

**NAME**_____ **RELATIONSHIP TO OWNER**_____ **PHONE**_____

SEE REVERSE SIDE

NAME OF CO-APPLICANT (IF APPLICABLE)_____ TITLE _____

RESIDENCE ADDRESS _____ CITY_____ STATE_____ ZIP CODE_____

TELEPHONE_____ OTHER_____ EMAIL _____

SOCIAL SECURITY#_____ FEDERAL ID (FEIN)_____ GA SALES TAX ID NUMBER_____ _____

DRIVERS LICENSE # _____ STATE_____

EMERGENCY CONTACT OTHER THAN YOURSELF

NAME_____ RELATIONSHIP TO OWNER_____ PHONE_____

PROFESSIONAL OPTION ONLY. ___ CHECK HERE ($400 per practitioner by O.C.G.A.) Please Submit Additional Documentation.

## THE FOLLOWING CONDITIONS APPLY TO ALL OCCUPATIONAL TAX/ REGISTRATION CERTFICATE APPLICANTS:

I (NAME) _____ BEING THE (TITLE)_____ DO HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. COMPLETION OF THIS FORM DOES NOT GUARANTEE OR GRANT ISSUANCE OF AN OCCUPATIONAL TAX CERTIFICATE/ BUSINESS LICENSE. THE CITY OF FOREST PARK RESERVES THE RIGHT TO NOT ISSUE OR RENEW A CERTIFICATE IN CASES WHICH THERE ARE DOCUMENTED VIOLATIONS OF THE CITY CODE AND/ OR ORDINANCES, OTHER TAXES OR FEES ARE OWNED TO THE CITY BY THE BUSINESS OR ITS OWNERS, OR IN WHICH THE BUSINESS FAILES TO MEET THE REQUIREMENTS SET FORTH BY THE CITY OF FOREST PARK. I UNDERSTAND ALL OCCUPATIONALTAXES AND CORRESPONDING FEES SHALL BE DUE OCTOBER 1 AND NOT LATER THAN NOVEMEBER 15 TO AVIOD A 10% PENALTY PLUS MONTHLY 1.5% ACCURED INTEREST CITY ORDINANCE CODE SEC. 9-1-1(a) ALL CITY TAXES (REAL & PERSONAL), SANITATION FEES AND ANY OTHER ASSESSMENTS MUST BE PAID BEFORE PAYMENT OF LICENSE WILL BE ACCEPTED. IF PAYING BY CHECK YOU MUST PAY TAXES, BUSINESS LICENSE, SANITATION FEES AND ANY OTHER ASSESSMENT WITH SEPARATE CHECKS ALL DELINQUENT BUSINESSES ARE ALSO SUBJECT TO FINES IMPOSED BY THE CITY. THE BUSINESS TAX DIVISION WILL MAIL YOU A RENEWAL APPLICATION IN AUGUST EACH YEAR. IN THE EVENT THAT YOU DID NOT RECEIVE A RENEWAL NOTICE, REMEMBER IT IS YOUR RESPONSIBILITY TO PAY YOUR FEE BY NOVEMBER 15 OF THE FOLLOWING CALENDAR YEAR TO AVOID A 10% PENALTY. ORD.SEC.3-3-18. ANY CERTIFICATE ISSUED WITHOUT PAYMENT OF ALL SUCH ASSESSMENTS HALL BE REVOKED IF THE OUTSTANDING ASSESSMENTS ARE NOT PAID WITHIN THIRTY (30) DAYS OF THE BUSINESS OWNER BEING NOTIFIED BY THE DEPARTMENT OF FINANCE'S DIRECTOR OF THE OUTSTANDING ASSESSMENTS. FOR PURPOSES OF DETERMINING THE DEMAND DATE OR THE NOTIFCATION DATE, THE DEMAND/NOTIFICATION DATE SHALL BE THE DATE THAT IS THREE (3) DAYS AFTER THE DATE OF MAILING THE DEMAND/NOTIFICATION, EXCLUDING SATURDAYS, SUNDAYS, AND HOLIDAYS. PLEASE NOTIFY US OF ANY CHANGES WITH YOUR BUSINESS. I.E., NAME AND OWNERSHIP CHANGE. LOCATION CHANGE, PARTNERSHIP, CORPORATION, BUSINESS CLOSING, ETC. ALL CHANGES SHOULD BE SUBMITTED IN WRITING. APPLICANTS MUST COMPLY WITH ALL APPLICABLE STATE REGUALTIONS OF THE PROPOSED BUSINESS ACTIVITY.

IMPORTANT INFORMATION FOR APPLICANTS/ BUSINESS OWNERS:

1. ALL REQUIRED LICENSES/CERTIFICATES MUST BE OBTAINED PRIOR TO THE ISSUANCE OF THE OCCUPATIONAL TAX CERTIFICATE.
2. NON PROFIT ORGANIZATIONS ARE REQUIRED TO REGISTER WITH THE CITY BEFORE OPERATIONS MAY BEGIN. COPIES OF STATE AND FEDERAL REGISTRATION DOCUMENTS NEED TO BE SUBMITTED WITH THE APPLICATION.
3. LICENSES ARE NOT TRANSFERABLE. IF YOU SELL YOUR BUSINESS IT IS YOUR RESPONISIBILTY TO NOTIFY THE CITY SO THAT YOUR LICENSE CAN BE CLOSED. THE NEW OWNER MUST APPLY FOR A LICENSE IN THEIR OWN RIGHT. IF YOU MOVE YOUR BUSINESS, YOU MUST COMPLETE A NEW APPLICATION FOR A BUSINESS LICENSE.
4. YOU MAY CHECK THE STATUS OF YOUR APPLICATION AT HTTP:// WWW.EGOVLINK.COM/FORESTPARK/ACTION.ASP.
5. ALL TRASH RECEPTACLES WILL BE PROVIDED BY THE CITY.
6. A LICENSE CONTRACTOR MUST OBTAIN ALL APPICABLE PERMITS PRIOR TI ANY NEW CONTRUCTION, RENOVATION, DEMOLITION, OR SIGNAGE.

__ CHECK IF ANY ADDITIONAL STATEMENT ATTACHED

SIGNATURE OF OWNER/AGENT:_____ DATE SUBMITTED:_____

## BUSINESS TAX OFFICE USE ONLY

BUSINESS TAX CLASS: _____ NAICS#: _____ TYPE: _____ ADMINISTRATIVE FEE: 75.00

LICENSE FEE AMOUNT:_____TOTAL AMOUNT FEE: _____ REGULATORY FEE _____

CHECK#_____ CA ____ CC _____ PROCESSED BY: _____ DATE:_____

STATE LICENSE# _____ DATE APPROVED:_____ APPROVED_____ ZONING_____

SANIT. SET-UP_____

( Signature of Sanitation Clerk) (Date Service Starts)

TAX EXEMPT ☐

DOCUMENTS REQUIRED: ___CLAYTON COUNTY FOOD PERMIT ___STATE LICENSE CERTIFICATE __ OTHER(SPECIFY)_____

Approved By:_____ Date: _____

****THIS FOR MUST BE COMPLETED TO OBTAIN YOUR BUSINESS LICENSE****

Forest Park

# M.A.R.C.

Merchant Awareness Reduces Crime

Forest Park Police Department is making its "**marc**" in the community

**Please print, read and fill out this form completely.**

**Date:** _____ **Type of Business:** _____

**Business Name:** _____ **Phone#:** _____

**Address:** _____ **Suite#:** _____

**Email address (if available):** _____

**Work Phone#:** _____ **Work Fax#:** _____

**Owner Name:** _____ **Owner's Hone Phone#:** _____

**Owner's Home Address:** _____

Circle Alarm Type(s): Burglar Fire Panic Hold up etc _____
Alarm Company: _____ Phone#: _____

Do you have any security concerns? If so, please explain:

_____
_____
_____

Have you noticed any problems in the area of your business? If so, what are they:

_____
_____

What can we the police do to help maintain a safe working environment?

_____
_____
_____

Emergency contact person: _____ Phone#: _____ Cell#: _____
Back-up person: _____ Phone#: _____ Cell#: _____
Back-up person: _____ Phone#: _____ Cell#: _____
Back-up person: _____ Phone#: _____ Cell#: _____

**CITY HALL PERSONNEL:** Please route this completed form to the police department upon license approval.

**COMMUNICATIONS USE ONLY:**

**Keyword:** _____

**Rolodex date:** _____

**CAD Date:** _____

06/2014

# ZONING VERIFICATION

PLANNING BUILDING & ZONING DEPARTMENT
785 FOREST PARKWAY
FOREST PARK,GA 30297
P: 404-608-2300
F: 404-608-2306

THE PURPOSE OF THIS FORM IS TO DETERMINE IF THE PROPOSED USE IS ALLOWED IN THE APPLICABLE ZONING, A COMPLETE AND ACCURATE DESCRIPTION OF THE PROPOSED USE WILL ALLOW THE CITY TO DETERMINE IF THE PROPOSED USE IS ALLOWED IN A TIMELY MANNER. A COMPLETED APPLICATION WILL BECOME INVALID NINETY (90) DAYS AFTER RECEIPT, UPON ANY APPICABLE CHANGE TO ZONING OR AT THE DISCRETION OF THE PLANNING BUILDING, AND ZONING DEPARTMENT

NAME OF PROPOSED BUSINESS/USE: _____

ADDRESS OF PROPOSED BUSINESS/USE: _____

DETAILED DESCRIPTION AND NATURE OF THE PROPOSED USE TO BE CONDUCTED AT SITE LISTED ABOVE:

_____

_____

_____

_____

_____

_____

IS THERE INTENT TO PERFORM CONSTRUCTION OR RENOVATIONS AT THIS LOCATION TO ACCOMMODATE THE PROPOSED ACTIVITY?

( ) YES ( ) NO

IF YOU ANSWERED YES, PLEASE DESCRIBE WHAT CONSTRUCTION OR RENOVATIONS ARE TO BE PERFORMED:

_____

_____

_____

NOTE: ANY APPLICANT THAT HAS INTENT TO SELL ALCOHOL I.E. LIQUOR, BEER OR WINE (SPIRITUOUS OR MALT ALCOHOLIC BEVERAGES) EITHER WHOLESALE, RETAIL OR FOR ON-PREMISES CONSUMPTION, SHALL IMMEDIATELY CONFER WITH, AND/OR MAKE APPLICATION WITH THE DEPT. OF POLICE SERVICES, LOCATED AT 320 CASH MEMORIAL BLVD. FOREST PARK, GA 30297 (404) 366-7280. (AN APPROVAL OF PRIMARY ACTIVITY WITHIN A PARTICULAR ZONED AREA SHALL NOT PRESENT A PRESUMPTION OF APPROVAL FOR ANY ALCOHOL LICENSE).

PREFERRED CONTACT METHOD
( ) E-MAIL ( ) PHONE

_____
PRINT NAME OF APPLICANT

_____
E-MAIL ADDRESS OF APPLICIANT

_____
SIGNATURE OF APPLICANT

_____
PHONE NUMBER WHERE APPLICANT CAN BE REACHED

_____
DATE

# CITY OF FOREST PARK

## DEPARTMENT OF OCCUPATIONAL TAX DIVISION

745 FOREST PARKWAY
FOREST PARK, GEORGIA 30297
TELEPHONE: (404) 366-4720 FAX: (404) 608-2344
EMAIL: tbyrd@forestparkga.org

## PROFESSIONAL PRACTITIONER
### REGISTRATION INFORMATION

Have you ever obtained a Professional Business License in the City of Forest Park? Yes _____ No _____

I _____, Hereby register my profession as
Last Name First Name Middle Initial

_____; and further certify that I am duly licensed by the

State of Georgia.

### PRINCIPAL OFFICE NAME AND LOCATION

Firm/ Company Name: _____

Street Address: _____ Suite:_____

City/State/Zip Code: _____

Telephone Number: _____ Facsimile Number: _____

MAILING ADDRESS IF DIFFERENT FROM ABOVE: _____

_____

*Under penalty law, I hereby certify and declare that the above information to the best of knowledge and belief is true and complete. I agree to notify the Office of Occupational Tax should any of the information change.*

Signature of Applicant: _____ Date: _____

1. New applicants must attach a copy of their State of Georgia license before application can be processed.

FOR OFFICE USE ONLY:

ACCOUNT NUMBER: _____ AMOUNT DUE: _____ APPROVED BY: _____ DATE: _____

*Affidavit Verifying Status for City of Forest Park Business License Application*

## O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a Business License or other public benefit, as referenced in O.C.G.A. § 50-36-1, from City of Forest Park, Georgia, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

1) _____ I am a United States citizen.

2) _____ I am a legal permanent resident of the United States.

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.

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 secure and verifiable document provided with this affidavit 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 Forest Park, Georgia.**

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE

___ DAY OF _____, 20____

_____
NOTARY PUBLIC

My Commission Expires:

_____
Signature of Applicant

_____
Printed Name of Applicant

*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 provide their alien registration number. A copy of verifiable documents are required when submitting this form.

**Please complete this affidavit and submit a copy of the identification document. Present in person at 745 Forest Parkway or e-mail to tbyrd@forestparkga.org.**

## Private E-verifying Status Form

By executing this affidavit under oath, as an applicant for a **Business certificate, Occupational or Professional license** as referenced in O.C.G.A. § 36-60-6(d), from **The City of FOREST PARK, GEORGIA**, the undersigned applicant representing the private employer known as_____ **[printed name of private employer]** verifies one of the following with respect to my application for the above mentioned document:

**1. Fill out this section between January 1, 2012, and June 30, 2012.**
(a) _____ On January 1st of the below signed year the individual, firm, or corporation employed five hundred (500) or more employees.

(b)_____ On January 1st of the below signed year the individual, firm, or corporation employed less than five hundred (500) employees. *If the employer selected 1(a) please fill out Section 4 below.*

**2. Fill out this section between July 1, 2012, and June 30, 2013.**
(a) _____ On January 1st of the below signed year the individual, firm, or corporation employed one hundred (100) or more employees.

(b)_____ On January 1st of the below signed year the individual, firm, or corporation employed less than one hundred (100) employees. *If the employer selected 2(a) please fill out Section 4 below.*
**3. Fill out this section on or after July 1, 2013.**

(a) _____ On January 1st of the below signed year the individual, firm, or corporation employed more than ten (10) employees.
(b)_____ On January 1st of the below signed year the individual, firm, or corporation employed less than ten (10) employees. *If the employer selected 3(a) please fill out Section 4 below.*

**4. The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6(a). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as listed below:**

_____
Federal Work Authorization User Identification Number

_____
Date of Authorization

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent state or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties allowed by such statute.

Executed on the ___ date of _____, 201___ in **Forest Park, Georgia.**

_____
Signature of Authorized Officer or Agent

_____
Printed Name of and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ____ DAY OF _____, 201___.

_____
NOTARY PUBLIC

My Commission Expires: