

## **MUST HAVE REQUIRED INFORMATION FOR LICENSES TO BE PROCESSED**

- Application must be completed entirely
- You **MUST** provide a form of photo identification
- You **MUST** provide proof that taxes are current for property.
- If you **DO NOT** own the property of the address given for the business, a notarized letter stating you have permission to use the property address as your active business location **HAS TO BE** included with application.
- You **MUST** provide a copy of your State Business License and/or a copy of your State Professional License.
- All application fees are **NON-REFUNDABLE**. It is the responsibility of the business owner to verify zoning before submitting application. Submitting an application does not necessarily mean you will be granted a business license.
- If your application pertains to Food/Food Services, you **MUST** provide DPH health inspection letter and all forms provided by the Meriwether County health inspector.
- If your application pertains to animals, you will need to provide letter from the Meriwether County Animal Control Director.

# BUSINESS LICENSE RENEWAL

MERIWETHER COUNTY, GA  
Building & License Department  
706-672-1283

Please follow the below instructions for Business License Applications

1. All forms must be completed in their entirety, front & back pages. (*incomplete forms will not be processed*)
2. You must provide us with a form of photo identification.
3. You must provide us with a copy of your current property taxes paid (without this your application will not be processed.) If your taxes are in a mortgage you can obtain your current statement from the Tax Commissioners office located @126 N. Court Square, Greenville, Ga.
4. Tax Commissioners Office Contact information: 706-672-4219
5. If you do not own your property of the address given on your application, we will need a notarized letter stating you have permission to use the property address as your active building address, please include with this a phone number to verify the information.
6. By submitting an application it does not necessarily mean you will be granted a BUSINESS LICENSE by Meriwether County, Georgia.
7. All application fees are **non-refundable (approved or denied)**
8. If your application pertains to Food/Food Services you must provide us with all Department of Public Health inspections and forms provided to you by the Meriwether County Health Inspector.
9. If your application pertains to animals your kennels will be inspected by our Animal Control Director, before any renewals or new business license can be issued.
10. Payment must accompany all applications, if you do not submit payment with your renewal your application will NOT be processed.

**Due Date: by December 31<sup>st</sup>, 2022**

**Late fee will apply if received after: January 15<sup>th</sup>, 2023**

- Mailing address for renewals: Business License Dept., P O Box 370, Greenville, Georgia 30222
- You may drop off at our office: 124 N. Court Square, Greenville, Georgia 30222
- Your new license will be mailed back to you or you may pickup within 14 days of receipt.

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IF you have closed your business please submit a written letter to our department via email stating this business is no longer in operation to: [e.davis@meriwethercountyga.gov](mailto:e.davis@meriwethercountyga.gov) or to the above P.O.Box 370, Greenville Ga. 30222

*\*Please note: all information on a business license in our office with exception to email addresses and personal telephone numbers are a form of public record. We do not share any information with a third party company for any reason.*

**MERIWETHER COUNTY BUSINESS LICENSE APPLICATION**  
**LICENSES ARE FOR CURRENT YEAR ONLY (Exp Dec. 31)**

TO AVOID LATE PENALTY OF \$35.00, APPLICATIONS MUST BE RECEIVED BY THE 3<sup>RD</sup> MONDAY  
 OF JANUARY EACH YEAR

(Please allow 14 business days for processing)

Business Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Mailing address if different \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email address: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_

Home based \_\_\_ Yes \_\_\_ No  
 Brick/Mortar business \_\_\_ Yes \_\_\_ No  
 Web based business \_\_\_ Yes \_\_\_ No  
 Sole Proprietor \_\_\_ Partnership \_\_\_  
 Corporation \_\_\_ LLC \_\_\_ Other \_\_\_  
 Resident of Meriwether County \_\_\_ Yes \_\_\_ No  
 Does applicant own this property \_\_\_ Yes \_\_\_ No  
 Check one: County business licenses \_\_\_  
 Occupational Tax Certificate \_\_\_

Emergency # \_\_\_\_\_  
 Business NAICS Code \_\_\_\_\_  
 Tax ID \_\_\_\_\_  
 State ID \_\_\_\_\_  
 MUST be registered with Ga SOS

# of Employees _____	
1 employee \$40.00	\$ _____
2 employees \$80.00	\$ _____
3-9 employees \$80.00 + \$15.00 per employee of 2	\$ _____
10 + employees \$185.00 + \$12.00 per employee over 10	\$ _____
** Max charge of \$600.00) (Late fee if app)	\$ _____
Admin fee	\$ <u>25.00</u>
(Are property taxes current) _____ Total fees due	\$ _____

Check one:  
 \_\_\_ I am a United States citizen  
 \_\_\_ I am a legal permanent resident of the United States  
 \_\_\_ 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.  
 \_\_\_ Other federal immigration agency is: \_\_\_\_\_

The undersigned applicant is also hereby verifying that he or she is 18 years of age or older and has provided at least one secure or verifiable document as required by O.C.G.A. 50-36-1 with this affidavit.

Please check one of the following:

\_\_\_\_\_ On January 1<sup>st</sup> of the below-signed year, the individual, firm, or corporation employees (MORE THAN 10 EMPLOYEES)  
 \_\_\_\_\_ On January 1<sup>st</sup> of the below-signed year, the individual, firm, or corporation employees (LESS THAN 10 EMPLOYEES)

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provision and deadlines established in the O.C.G.A. & 36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of the authorization are as follows:

Name of Private Employer \_\_\_\_\_ Federal Work Authorization User ID # \_\_\_\_\_  
 Date of Authorization \_\_\_\_\_ E-Verify Number \_\_\_\_\_

By executing this affidavit under oath, as an application for business license in Meriwether County, Georgia, or other public benefit as reference in O.C.G.A. Section 50-36-1 & 36-60-6 (D), I am stating the following with respect to my application for Business, Occupational Tax Certificate, Alcohol License, or public benefit.

Executed, in \_\_\_\_\_ Georgia on \_\_\_\_\_, 202\_\_

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

Notary: Sworn before me on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ My commission expires: \_\_\_\_\_ Stamp