



CITY OF TYBEE ISLAND BUSINESS LICENSE APPLICATION

City of Tybee use only:	
Date _____	
New _____	
Renewal _____	
License # _____	

Business Name			
Location			
Mailing Address			
Phone		Email	
Federal ID # Or SSN #		Sales Tax ID	NAICS Code
Business Type (<i>circle one</i>): Sole Proprietor Partnership Corporation LLC Non-Profit Other: _____			
Names and Home Addresses of Owners, Partners or Corporate Officers			
Names	Home Address	City, State, Zip	Title

Describe the business you would like to license:

Has this business or anyone connected with this business been cited or charged with any violation of Georgia Law, Federal Law, Local Ordinance, or any Rule or Regulation of the State Revenue Commissioner or any Rule or Regulation of the City or County within the past 12 months? (*circle one*) YES or NO (If YES, include details)

Any business that requires state licensing must present state license when applying.

It is the applicant's responsibility to ensure zoning conformance. If there is a question as to whether the location is zoned correctly please contact the City Marshal at 912-472-5098 or the Zoning Department at 912-472-5033. A schedule of regulatory fees is attached. Application for alcohol license requires a different form and city council approval. Application for live or recorded entertainment requires a separate form, annual review and city council approval.

Are you transporting your customers/clients as part of your business?(Land or Water)_____ Any business that transports clients/customers must provide a proof of insurance, i.e. declaration page showing expiration date of policy.

Applicant Signature _____ Date _____

Printed Name _____

Received by _____ Date _____

ROUTING	APPROVAL	BY	DATE	FEES
City Manager / Administrator	REQUIRED			1000 Occupational Tax 125.00
Zoning Approval	REQUIRED			9999 Administration Fee 10.00
Insurance Policy Required for \$ _____	YES or NO			\$100. Transportation Fee

BUSINESS LICENSE INFORMATION

Every business in this city or doing business or engaged in business within the city is hereby required to have a business license from the city for the privilege of engaging in a business, profession or occupation within the corporate limits, unless city licensing is prohibited under state law or the activity is exempted by this Code.

A health inspection is required prior to opening for any new business that has ice or food service. Contact the Chatham County Health Department at (912) 356-2441. A Life Safety inspection by the Chatham County Fire Marshal is required for new businesses. The contact number is (912) 201-4306. If any renovations are to be done a building permit is required. Contact the Planning & Zoning Department by calling (912) 472-5030.

Registration of Contractors: Any non-Tybee Island contractor working on the island must complete a Contractor Registration application and an Affidavit Verifying Status. The applicant must present a current local Business License and a current State License, if applicable. The fee for contractor registration is \$20.00 annually.

Regulatory fees are charged as follows, please include if your business falls under the following classifications:

LICENSE CLASSIFICATION	FEE
Occupational Tax (Business License Fee) (Required for a business on the Tybee Island)	125.00
Administrative Fee (Required for a business on Tybee Island)	10.00
Retail Beer/Wine – Package Sales Only, Consumption on Premises Prohibited	350.00
Retail Beer/Wine – Sale by Drink for Consumption on Premises Only	575.00
Retail Liquor – Sale by Package Only, Consumption on Premises Prohibited	850.00
Retail Liquor – Sale by Drink for Consumption on Premises Only	1,250.00
Retail Liquor – Sale by Package & Drink both in One Building under One Ownership	2,000.00
Sunday Sales – Sale by Drink for Consumption on Premises Only	150.00
Sunday Sales – Package Sales Only	50.00
Wholesale Beer	765.00
Wholesale Liquor	1,500.00
Wholesale Wine	150.00
Distiller, Brewer, or Manufacturer of Alcoholic Beverages	300.00
Special Event – Public or Private Property - Beer, Wine (no current license) per event	50.00
Special Event – Public or Private Property - Beer, Wine (no current license) 3 days	100.00
Special Event – Public or Private Property - Beer, Wine (holding current license) per event	10.00
Special Event – Business or Private Property – Beer, Wine, Liquor (no current license) per event	50.00
Special Event – Business or Private Property – Beer, Wine, Liquor (no current license) 3 days	100.00
Special Event – Business or Private Property– Beer, Wine, Liquor (holding current license) per event	10.00
Advertising Bench, per bench	25.00
Amusements, Itinerant (Circus, Carnival)	\$75 per day / \$600 maximum
Beach Equipment, Beach Vehicle, and Water Craft Rental, per site	300.00
Bondsman	165.00
Book & Magazine Canvasser, registration fee	45.00
Contractor Registration Fee (Building & Construction Contractors, Subcontractors and Tradesmen, licensed in another jurisdiction)	20.00
Escort	500.00
Entertainment License	50.00
Insurance Sales	40.00
Massage therapist & other miscellaneous health practitioner	250.00
Private Parking Lot	200.00
Promoter – Special Events, Pageants, Festivals, Exhibitions, Sporting Events, Shows, per Single Event	50.00
Transient Merchant, per day	75.00
Vendor, Festival Hawker, per day	25.00
Vendor, Arts & Crafts, per event	25.00
Pedicabs for hire	100.00
Taxi, Scenic and Sightseeing Touring Vehicles, Charter- Land or Water	100.00



License #: _____

Affidavit Verifying Status for City Public Benefit Application

By executing this affidavit under oath, as an applicant for a City of Tybee Island, Georgia, Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, Contract, or other public benefit as referenced in O.C.G.A. Section 50-36-1, the undersigned applicant representing _____ (name of business), verifies one of the following with respect to my application for public benefit:

1) _____ **I am a United States citizen.**
(document example: **Driver's license, US Passport, US Military Card, etc.**)

OR

2) _____ **I am a legal permanent resident of the United States**
(document example: I-551 Permanent Resident Card, Certificate of Citizenship, etc.)

2) _____ **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: _____

(document example: **Temporary Resident Card; Employment Authorization Card, etc.**)

- 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), 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.

Signature of Applicant

Date

Printed Name

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

Notary Public _____

My Commission Expires: _____

PLEASE COMPLETE THIS AFFIDAVIT AND SUBMIT A COPY OF THE IDENTIFICATION DOCUMENT (front and back) **PRESENT IN PERSON** AT 403 BUTLER AVE **OR FAX** TO 912- 786-5832 **OR E-MAIL** TO: SSHAYER@CITYOFTYBEE.ORG . REFERENCE YOUR BUSINESS LICENSE NUMBER IN THE SUBJECT LINE OF YOUR E-MAIL. If fax or email this form, please have this form notarized prior to submitting it to The City of Tybee Island at sshayer@cityoftybee.org or 912 786-5832. The City of Tybee has a notary, if submitting in person.

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:

E-VERIFY AFFIDAVIT

For Employers with 10 or fewer 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 _____, _____, 201__ in _____(city), _____(state).

Printed Name of Exempt Private Employer

Signature of Exempt Private Employer or Authorized Officer or Agent

Printed Name and Title of Person Executing Affidavit

For Employers with 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 (**Four-Six numbers**)

Date of Authorization

Name of Private Employer

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

Executed on _____, _____, 201__ 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 _____, 201__.

NOTARY PUBLIC

If fax or email this form, please have the forms notarized prior to submitting it to The City of Tybee Island at sshaver@cityoftybee.org or 912 786-5832. The City of Tybee has a notary, if submitting in person.