



City of Midway

Mayor
Levern Clancy, Jr.
Mayor Pro-Tem
Dr. Clemontine F. Washington

Councilmember's
Catherine Melice Gerace
Henry O. Stevens, Jr.

October 28, 2020

Dear Business Owners:

The **Due Date** for your Business Occupational tax is **January 1st** of each year. The Business Occupation Fees are based on the **NUMBER OF EMPLOYEES**.

APPLICATION GUIDELINES

- 1. All applications must be completed and signed in order to be processed. All spaces must be filled out completely. If not applicable, insert (N/A).**
- 2. A Business Occupational Tax Certificate will be processed ONLY when all applicable forms have been completed and returned with the application.**
- 3. Please include the following documents that are applicable to your business.**
 - (a) A copy of all State Licenses required by the State of Georgia.**
 - (b) Restaurants: Copy of the current Environment Health Department Inspection Grade Certificate.**
 - (c) Copy of your paid receipt from the Liberty County Tax Commissioner Office or a letter from the Liberty County Tax Assessor's Office for your business.**
- 4. PENALTIES will be applied beginning APRIL 1, 2021 on outstanding balances.**

Sincerely,

Lynette G. Cook-Osborne

Lynette G. Cook- Osborne
City Clerk

Manager/ Owner Initials

City of Midway
P. O. Box 125
Midway, GA 31320
Occupation Tax & Regulatory Fee (Business License)
For the year of 2021

Date _____ **Check#** _____ **ID#** _____

1. **Name of Owner:** _____
Home Address: _____
Daytime Phone#: _____

2. **Name of Company:** _____
Service Address: _____
Mailing Address: _____
Telephone#: _____
E-mail Address: _____

3. **Type of Business:** _____
(Example: Retail Sales, Beauty Shop, Manufacturing, etc.)

4. **Federal Tax Id. or Social Security#:** _____

5. **State Tax Id. #:** _____

6. **Georgia Sales Tax Id.#** _____

7. **E-Verify#:** _____

8. **Number of Employees :** _____ (This includes the owner and any part-time employee equivalent of full-time based on 40 hours per week.)

9. **Save and E-verify affidavits must be signed and documentation attached.**

10. _____
Applicant or Authorized Representative Signature

**CONTINUED
LICENSE FEE COMPUTATIONS**

Number of Employees: _____ (Enter Amount Due) \$ _____
(Including owners)

Administration: Fee Due for New Application \$ _____
And/ or Relocation Application

Other Fee(s): _____ \$ _____

Interest: \$ _____

Penalty: \$ _____

Total Due \$ _____

IMPORTANT: PLEASE READ CAREFULLY

The applicant hereby agree to be bound by all of the terms and conditions of the Ordinance adopted by the City of Midway, Georgia and any laws as may apply to the above business. I hereby agree to permit during business hours reasonable inspections as authorized by law.

This _____ Day of _____, 20_____
_____ (Authorized Signature of Applicant)

PERSONALLY before the undersigned appeared _____
Who on Oath had sworn that the above information given therein is true and correct?

Sworn to and subscribed before me this _____ day of _____, 20_____

STATE OF _____ COUNTY OF _____ CITY OF _____

(NOTARY STAMP OR SEAL) (NOTARY PUBLIC)

LICENSES MAY BE SUSPENDED OR REVOKED FOR VIOLATION OF THE TERM OF THE ORDINANCE. NO BUSINESS TO OPERATE WITHOUT APPROVAL OF THIS APPLICATION FOR LICENSE. NOTIFICATION IS REQUIRED FOR CLOSING OR CHANGE OF BUSINESS LOCATION.

Remarks: _____

Approved: _____ Date: _____

U.S. CITIZEN/QUALIFIED ALIEN AFFIDAVIT

By executing this affidavit under oath, as an applicant for a City of Midway, Georgia Business License or Occupational Tax Certificate, Alcohol License, or other public benefits 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 Midway Business License of Georgia Occupational Tax Certificate, Alcohol License, Tax Permit or other public benefit (CIRCLE ONE) for:

(Name of natural **PERSON** applying on belief of individual, business, corporation, partnership, or other private entity)

1) _____ I am a United States Citizen

OR (check one)

2) _____ I am a legal permanent resident 18 years of age or older, or I am an otherwise qualified alien or non-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 false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of violation of Code Section § O.C.G.A 16-10-20 of the Official Code of Georgia.

Signature of Applicant:

Date:

Printed Name:

*

Alien Registration Number for Non-Citizens

SUSCRIBED AND SWORN
BEFORE ME ON THIS THE

_____ DAY OF _____

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



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Business License Department Fee Schedule

(Business License Fees (based on number of employees))

0-5	Employees	\$100.00
6-15	Employees	\$200.00
16-30	Employees	\$300.00
31-50	Employees	\$400.00
50+	Employees	\$500.00
Professionals		\$400.00 each

Alcohol License Fees

Package Only

No Consumption on the Premises

Beer Package, only	\$250.00
Wine Package, only	\$250.00
Liquor Package, only	\$2,000.00

Consumption on Premises

\$500.00

Additional Fees

Application Fee	\$30.00 (non-refundable)
Copy Fee	\$.10 per page
Fax Fee	\$ 1.00 first page .25 each additional page
Copy of Occupational License	\$ 30.00
Name change on License	\$ 30.00
Relocation Fee	\$ 30.00