

CITY OF UNION
 101 SHARPE AVENUE
 UNION, SC 29379
 Phone: (864) 429-1720 Fax: (-)

APPLICATION FOR BUSINESS LICENSE

Application Date: 2/5/2016

License Year: 2015

AVOID PENALTY

This Application with remittance in full must be completed and returned with full payment on or before 08/01/2015.
 If no longer in business, please indicate and return the application.

Business Contact Information

BUSINESS NAME		PHYSICAL LOCATION			
MAILING ADDRESS		CITY	STATE	ZIP	PHONE
TAX ID NUMBER	RESPONSIBLE PERSON		EMAIL		

Emergency Contact

NAME		PHONE	MOBILE	
ADDRESS		CITY	STATE	ZIP

Business Information

ACCOUNTANT		BUSINESS DESCRIPTION		
NAICS CODE		OWNERSHIP TYPE (Corp, Individual, Partnership, etc.)		
BONDING COMPANY	BOND NUMBER	OTHER LICENSE		

OFFICE USE ONLY	CODE	RESIDENT	RENEW	FAL
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Calculation of License Fee

Gross Receipts _____	License Fee _____
	Late Payment Penalty _____
	TOTAL PAYMENT _____

 Signature Title Date