

City of Helen Georgia  
Occupational Tax Renewal Application  
25 Alpenrosen Strasse  
PO Box 280 Helen, GA 30545  
Phone: (706) 878-2733



Attached is the renewal form for your Occupational Tax. This tax is due by December 31<sup>st</sup>. Please make sure that you **completely fill out all pages of the renewal form**. Do not forget to sign the forms and have them notarized where indicated. Notary services are available at Helen City Hall at no charge.

Georgia House Bill 87 requires that the business owner provide us with a verifiable form of identification before we issue your certificate. **Please provide a copy of your driver's licenses or another item listed on the verifiable identification list which is available at City Hall.**

Your application must include your Georgia Sales Tax Number and Employer Identification Number to be considered valid. If you have not already done so, you must provide a copy of your original State of Georgia Sales Tax wall certificate to the city.

- **If your business is a parking lot**, Section 14-160 requires all parking lots maintain liability insurance. Please include a valid copy of your insurance binder with your application.
- **If you are a landlord**, please attach a list of the physical locations of your rental properties located in the City of Helen.
- **If your business is food service**, please remit Grease Trap Permit fees.
- **If your business involves weekly or nightly rentals**, provide the owner's Lodging Registration Application for each location. (This document can be found online at [www.cityofhelen.org](http://www.cityofhelen.org) or at City Hall.) You must remit payment and a monthly Hotel/Motel Tax Report by the 20th of each month for the previous month's tax collected. Report is required even if there is -0- income.
- **If your business has City Directional Signs**, please remit fees.
- **If your business sells alcohol**, the Occupational Tax must be paid prior to issue of Alcohol License. If you have a Liquor Pouring License, you must remit payment and a monthly Distilled Spirits Tax Report by the 20th of each month for the previous month's tax collected.
- **If your business involves horse carriages**, include a copy of your Stable Licenses from the Georgia Department of Agriculture and a current copy of your insurance binder, as they are required by the state to be on file with the city. Also, a yearly inspection must be completed on each carriage before an Occupational Tax Certificate will be issued.

Accepted forms of payment are cash, check, money order & debit/credit card. Please note if a debit/credit card is used a 5% fee will be added. Refer to the tax table on Page 3 for amount due. A \$15.00 administration fee will be included in total payment.

All fees must be paid prior to the City issuing the Occupational Tax Certificate. If you have any questions, please feel free to contact City Clerk Marilyn Chastain.

A handwritten signature in black ink, reading "Marilyn M. Chastain". The signature is written in a cursive, flowing style.

Marilyn M. Chastain CMC  
City Clerk

**All pages, fields, and questions on this application must be completed, signed, and notarized where indicated and returned to the City of Helen, including payment.** Please make any corrections on this form or provide on a separate sheet. If blank, please type or write in ink so that we can update your account, if not applicable put NA. Occupational Taxes as well as other monies owed to the City including, but not limited to, excise taxes, water bills, utility bills or otherwise, must be submitted and paid prior to the City issuing the license.

License #:		License Type:	
Corporate Name:		Business Description:	
Business Name:		Business Location:	
Business Phone:		Mailing Address:	
Business Email:		City State Zip:	
Owner of Business:		Emergency Contact:	
Owner Phone:		Emergency Phone:	
Owner Email:		Type of Ownership:	
Owner Date of Birth:		State Incorporated:	
SS#:		Date Incorporated:	
Driver License #:		FEIN:	
Manager (if applicable):		Sales Tax ID #:	
Manager Phone:		Gas Company:	
Manager Email:		Electric Company:	

Are you a home-based business?  Yes  No

Are you a United States Citizen?  Yes  No

If no, additional paperwork may be required. Please see Helen City Hall.

Do you have Natural or Propane Gas?  Yes  No Are MSDS Sheets Available for Hazmat?  Yes  No

Name of Biological Materials: \_\_\_\_\_

Name of Hazardous Chemicals: \_\_\_\_\_

If your business has a grease trap:  Class 1 Counter Grease Trap (\$300) or  Class 2, 3, or 4 Underground Grease Trap (\$100)

DINING license (required): # of Indoor Seats: \_\_\_\_\_ # of Outdoor Seats: \_\_\_\_\_

LODGING license (required): # of Rooms: \_\_\_\_\_

If your business provides Carriage Rides: Passenger Capacity: \_\_\_\_\_

Driver Name(s): \_\_\_\_\_ Horse Name(s): \_\_\_\_\_

If your business has directional signs: # of Signs: \_\_\_\_\_ (\$25 each) Location(s): \_\_\_\_\_

\_\_\_\_\_

Pursuant to O.C.G.A. § 48-13-7, an occupation tax based upon number of employees in the State of Georgia is levied upon businesses and practitioners of professions and occupations with one or more location or offices within the corporate limits of the city. The number of employees of the business or practitioner and computed on a full-time position basis or full-time equivalent basis, provided that for the purposes of this computation an employee who works 40 hours or more weekly shall be considered a full-time employee and that the average weekly hours of employees who work less than 40 hours weekly shall be added and such sum shall be divided by 40 to produce full-time equivalents in the State of Georgia in accordance with the following schedule:

Number of Full Time Employees	Rate of Tax (flat fee)
1-3	\$350.00
4-7	\$625.00
8 & over	\$875.00

NUMBER OF FULL-TIME EMPLOYEES (OWNER COUNTS AS 1) THIS YEAR: \_\_\_\_\_(required)

NUMBER OF PART-TIME EMPLOYEES THIS YEAR: \_\_\_\_\_(required)

If at any time during the previous year, the individual, firm, or corporation employed more than ten (10) employees, you must provide your **E-VERIFY** number. E-Verify \_\_\_\_\_ Number:

**Renewal Occupational Tax Fee:** \$ \_\_\_\_\_

**Grease Trap (if applicable):** \$ \_\_\_\_\_

**Directional Sign(s) (if applicable):** \$ \_\_\_\_\_

**Administrative Fee:** \$15.00 \_\_\_\_\_

**Total Due:** \$ \_\_\_\_\_

City of Helen requires all business to pay, in addition to the Occupational Tax, a \$15 Administrative Fee.

**NOTE: If the renewal payment is not received by December 31<sup>st</sup> there will be a penalty of ten percent of the tax due, then 1% penalty per month on the total amount due.**

**Any person who knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact; makes a false, fictitious, or fraudulent statement or representation; or makes or uses any false writing or document, knowing the same to contain any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of state government or the government of any county, city or other political subdivision of this state shall, upon conviction thereof, be punished by a fine of not more than \$1,000.00 or imprisonment of not less than one nor more than five years, or both. O.C.G.A. § 16-10-20**

I have read and understand the above statement of the law and by signing my name below I attest that all the information contained in this **Occupational Tax Renewal Application** is true and correct to the best of my knowledge.

Subscribed and sworn

before me on this the \_\_\_\_\_ Signature of Applicant/Owner:

\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Printed Name of Applicant/Owner:

\_\_\_\_\_  
Notary Public  
My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Name of Business Represented

RETURN THIS AFFIDAVIT VIA EMAIL, MAIL, IN-PERSON, OR FAX WITH THE FOLLOWING DOCUMENTS:

- Copy of valid legal picture ID (Driver's license, passport, etc.)
- Fire Inspection Report, if applicable
- Health Inspection for restaurants
- Drawing of floor plan showing exits (if changes were made)

IF YOUR COMPANY IS NO LONGER IN BUSINESS, PLEASE NOTIFY US SO YOUR ACCOUNT CAN BE INACTIVATED.

**FOR QUESTIONS, PLEASE CONTACT OUR OFFICE AT (706) 878-2733.**