# OCCUPATIONAL TAX CERTIFICATE CHECKLIST

To obtain an Occupational Tax Certificate, please complete the following steps and submit your complete application packet to Peachtree City – City Hall:

- ☐ **Pre-Opening Construction (if applicable):** If your business involves any construction before opening, contact the Building Department to obtain the required permits. Once construction is complete, proceed with the following steps.
- ☐ **Zoning Approval:** Request zoning approval by emailing the attached zoning approval form to the Planning Department. Include the signed form in your application packet.
- ☐ **Fire Inspector approval (if applicable):** Contact the Fire Inspector to schedule a fire inspection, which is only required for non-home-based businesses and daycares without building permits. Include the signed form in your application packet.
- ☐ **Submit Alcohol and Massage Services Declaration:** This is mandatory for all businesses. Submit the attached "Declaration of Intent for Alcohol Sales and Massage Services" form to the City Clerk's office. Include the signed form in your application packet.
- ☐ **E-Verify and S.A.V.E Forms:** Complete, sign, and notarize these forms. Please include them in your application packet.
- ☐ **Complete the Occupational Tax Certificate Application Form:** Fill out this form thoroughly and include it in your application packet.
- ☐ **Valid Licenses and Permits:** Ensure you have all required licenses and permits applicable to your profession, including those issued by the State of Georgia and the County. nclude copies of all applicable licenses and permits in your application packet.
- ☐ **9-1-1 Emergency Contact Form (if applicable):** Required for non-home-based businesses and daycares. Complete and include in your application packet.
- ☐ **Submit Completed Application Packet to City Hall:** Gather all the above documents and submit your complete application packet to Peachtree City – City Hall for processing.

***Please Note:*** *To be processed, your application must be submitted with all the required documents listed above. The necessary forms and contact information to complete this process are included in the attachments to this checklist.*

Thank you,

Peachtree City - City Hall

# Occupational Tax Certificate Contact Information

**Zoning Approval:**

*Planning Department*

*Primary Contact: Beverly Ramsey*

*Email: bramsey@peachtree-city.org*

*Phone: 770-487-5731*

**Fire Inspection:**

*Fire Marshal's Office*

*Deputy Fire Marshal: Josh Teal*

*Phone: 470-544-4011*

*Email: fireinspector@peachtree-city.org*

**Building Permits:**

*Building Department*

*Primary Contact: Candis Davis*

*Email: cbdavis@peachtree-city.org*

*Phone: 770-487-8901*

**City Hall Front Desk:**

Email: csr@peachtree-city.org

Phone: 770-487-7657

**Fayette County Environmental Health**

District 4, Georgia Department of Public Health 245 Booker Avenue, Suite E, Fayetteville, GA 30214
Office: 943-209-8057
district4health.org

CITY OF PEACHTREE CITY ZONING DEPARTMENT
153 Willowbend Road, Peachtree City, GA 30269
Phone:770-487-8901 Email: planner@peachtree-city.org
www.Peachtree-City.org

# Occupational Tax Zoning Approval Form

**Applicant:** _____

**Applicant Phone Number:** _____ **Applicant Email:** _____

**Address of Proposed Business:** _____

_____

**Name of Business:** _____ **Number of Employees:** _____

**What Type of Business is Proposed:** ☐ **Commercial - Warehouse** ☐ **Commercial – Office Space** ☐ **Home-Based**

**Business Description of Business** *(What does your business do? Be as descriptive as possible)*:

**Applicant Signature**: _____ **Date:** _____

## For Zoning Department Use Only:

**Zoning District:** _____ **Fire Inspection Approval:** ☐ **Completed** ☐ **Pending Approval**

**Signature:** _____ **Approval Date:** _____

**Stipulations for Approval:**

PEACHTREE CITY FIRE MARSHAL'S OFFICE
10 Planterra Way, Peachtree City, GA 30269
www.peachtree-city.org

*Email: fireinspector@peachtree-city.org*

# Fire Inspection Occupational Tax Form

**Business Name:** _____

**Business Address:** _____

**Business Owner:** _____

**Phone:** _____ **Email:** _____

**Primary Contact:** _____

**Phone:** _____ **Email:** _____

**Building Owner:** _____ **Phone:** _____

**Building Address *(if different)*:** _____

**What Type of Business is Proposed:** ☐ **Commercial - Warehouse** ☐ **Commercial – Office Space** ☐ **Home-Based Business**

**Description of Business:** _____

_____

**Square footage to be Occupied:** _____

**List any storage of hazardous materials or processes:** _____

_____

**Signature:** _____ **Date:** _____

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## For Fire Inspector Use Only:

**Inspection Conducted by:** _____

**Signature:** _____ **Approval Date:** _____

**Fire Inspection Fees: $100.00**

PEACHTREE CITY FIRE & RESCUE
FIRE MARSHAL'S OFFICE
10 PLANTERRA WAY
PEACHTREE CITY, GA 30269
PHONE: 770-631-2091

WWW.PEACHTREE-CITY.ORG

**** Please have this form completed to give to the Fire Marshal on the day of your fire inspection. This form is NOT to be turned in with your Occupational Tax Application. ****

Dear Peachtree City Business Owner,

Thank you for your continued investment in Peachtree City. To provide the best possible Fire Protection services to your business, I would like to provide some information to you, as well as gather some information about your business for our records. Please return a copy of this document with your application.

Please provide the most up to date information:

**Name of Business:** _____

**Address of Business:** _____

_____

**Type of Business:**

- Assembly (restaurants, bars, workout facilities, etc.)
- Mercantile (storefront, selling items inside store, drugstore, hardware store, etc.)
- Business (offices, dental office, doctor's office)
- Storage (warehouse, self-storage)
- Industrial (manufacturing, etc.)

Does your business have any of the following fire protection systems? If so, please place a check mark next to the ones you have:

- **Fire Sprinkler-** If your business has a fire sprinkler system; a licensed contractor must test it every year. In most cases, this is the responsibility of the building owner unless the lease specified otherwise.
- **Fire Pump-** If your business has a fire pump; a licensed contractor must test it every year. In most cases, this is the responsibility of the building owner unless the lease specified otherwise.
- **Fire Sprinkler Standpipe-** If your business has a fire sprinkler standpipe system; a licensed contractor must test it every year. In most cases, this is the responsibility of the building owner unless the lease specified otherwise.
- **Private Fire Hydrants-** If your business has fire hydrants that are located on your side of the water meter (vault) they must be inspected and maintained every year by a licensed contractor. In most cases, this is the responsibility of the building owner unless the lease specified otherwise.
- **Fire Alarm-** If your business has a Fire Alarm System; a licensed contractor must test it every year. Security systems that monitor a smoke detector as part of the system do not fall under this requirement.

PEACHTREE CITY FIRE RESCUE
FIRE MARSHAL'S OFFICE
10 PLANTERRA WAY
PEACHTREE CITY, GA 30269
PHONE: 770-631-2526

FAX: 770-631-2540

- **Kitchen Hood Extinguishment System-** A restaurant with a Hood Extinguishment System must have the system inspected and serviced every 6 months by a licensed contractor.
- **Kitchen Hood Exhaust System-** A restaurant with a Hood Exhaust System must keep the system clean and in good working order. A professional contractor must clean the system at least every 3 months.
- **Emergency Power Generator-** Emergency Power Generators must be serviced by a licensed technician annually.
- **Spray Paint Booth-** Spray Paint Booth suppression systems must be inspected and serviced annually by a licensed technician
- **Special Suppression System-** Special Suppression Systems (Halon, etc.) must be inspected and serviced annually by a licensed technician.
- **Fire Extinguishers-** All commercial occupancies in Georgia must have an appropriate amount of Fire Extinguishers. A licensed technician must service these extinguishers annually.
- **Exit Signs and Emergency Lighting-** All exit signage must always be operable. These signs must be lit on regular power and when the power goes out. Backup power can be by battery or generator. The occupant or landlord (see lease agreement) is responsible for maintaining these systems.

Peachtree City Fire-Rescue utilizes a third-party system to keep track of Fire Prevention System maintenance. It is the responsibility of the occupant to ensure their systems are compliant. The service technician must report service, deficiencies and update repairs to **The Compliance Engine.** This must be done within one week of the service. Any deficiencies must be repaired within 90 days of their discovery. We suggest that payment not be made to the contractor until the required reports are submitted. For more information on **The Compliance Engine**, see the attached pamphlet.

**Person Responsible for Maintenance of Fire Protection Systems-** _____

**Email Address-** _____

Phone Number- _____

If you have any questions about this information, please contact Deputy Fire Marshal Josh Teal at: jteal@peachtree-city.org

*Trent J. Jenkins*

Trent Jenkins, CFSFI, IAAI
Fire Marshal
Peachtree City Fire Rescue
Phone: 770-631-2526

**** Please have this form completed to give to the Fire Inspector on the day of your fire inspection.**
****This form is NOT to be turned in with your Occupational Tax Application. ****

**PEACHTREE CITY FIRE & RESCUE**
FIRE MARSHAL'S OFFICE
10 PLANTERRA WAY
PEACHTREE CITY, GA 30269
PHONE: 770-631-2091

WWW.PEACHTREE-CITY.ORG

# City of Peachtree City

Ordinance Number 38-75 Maintenance and reporting of records for fire safety systems

Requires all fire and life safety system inspection, test and repair reports be sent electronically by your inspection company to

## www.thecomplianceengine.com

Systems that require reporting are:

Automatic Fire Sprinkler System
Fire Alarm System
Commercial Kitchen Hood Cleaning
Paint Spray Booth
Standpipe Systems
Private Hydrant System
Fire Pump
Commercial Kitchen Hood Suppression
Emergency Generator
Special Suppression Systems
Active Smoke Control System

Please have your inspection company register at:

www.thecomplianceengine.com

For technical support, contact The Compliance Engine directly at

855-279-2371 or support@mybrycer.com

PEACHTREE CITY FIRE & RESCUE
FIRE MARSHAL'S OFFICE
10 PLANTERRA WAY
PEACHTREE CITY, GA 30269
PHONE: 770-631-2526
FAX: 770-631-2540
FIREINSPECTOR@PEACHTREE-CITY.ORG

# PREPARING FOR A FIRE SAFETY INSPECTION

**Emergency Lights and Exit Signs** – Must always be fully functional.

**Fire Extinguishers** – Each must have a tag with the date of service (serviced annually). Should be visible and readily accessible. MUST be mounted - Not on the floor.

**Extension Cords** – Not for permanent use. Replace with surge protected power strips. Surge protectors must be connected directly to an outlet, not "daisy-chained" to each other. Do not overload power strips. Do not run extension cords through walls, ceiling, or under doors or rugs.

**Exits** – Keep exit doors unlocked and clear of obstructions. Keep exit paths completely clear.

**Electrical Panels** – Must be easily accessible. A 3 ft. minimum clearance is required around panel. Keep door panels closed. Open spaces inside panel are NOT allowed.

**Electrical boxes, switches, and outlets must have their covers in place.**

**Electrical Rooms, Boiler and HVAC rooms** – Not for storage use. Remove all combustibles.

**Fire Sprinkler System** – Must be easily accessible (3 ft. clearance). Serviced annually, and every 5 years.

**Good Housekeeping** – Flammables, combustibles, trash, and debris must not be allowed to accumulate and should be regularly removed from the premises. Any flammable or combustible liquids must be stored in an approved container or cabinet. No storage allowed under stairways or ramps.

**Compliance Engine** – Your **service provider** must electronically send all services, tests and repair reports to **thecomplianceengine.com**. This applies to:

- Automatic Fire Sprinkler System
- Commercial Kitchen Hood Cleaning
- Commercial Kitchen Hood Suppression
- Private Fire Hydrants
- Special Suppression Systems
- Active Smoke Control System
- Fire Alarm System
- Fire Pump
- Standpipe System
- Paint Spray Booth
- Emergency Generator

A self-inspection is important for ensuring the safety of patrons and employees. By assessing these items, building owners will be aware of fire hazards and life safety issues. This will lead to a more positive inspection experience, and you may avoid fees and possible fines. If you have any questions, please contact the Fire Marshal's Office.

Note: This list is not comprehensive and should serve only as a guide for essential inspection activities.

PEACHTREE CITY CLERK'S OFFICE
151 Willowbend Rd., Peachtree City 30269
Phone: 770-632-4262 Email: scollins@peachtree-city.org

# Declaration of Intent for Alcohol Sales and Massage Services

**Applicant Name**: _____

**Applicant Phone Number:** _____**Applicant's Email:** _____

**Name of Business**: _____

**Business Address**: _____

_____

## Please check the appropriate box(es) below:

☐ This business will sale and/or serve alcohol.

☐ This business will provide massage services.

☐ This business will not engage in any of the above activities.

## Declaration:

By signing below, I, the undersigned applicant, declare that the information provided herein is accurate and complete to the best of my knowledge. I understand that serving alcohol and/or providing massage services requires additional licensing and approvals from the City of Peachtree City. I hereby authorize the City Clerk's office to initiate the necessary processes for obtaining such licenses if applicable.

**Applicant Signature:** _____ **Date:** _____

*Note for Applicants:*

***Alcohol Services:*** *Peachtree City requires specific licenses for businesses intending to sell alcoholic beverages, including various categories for retail and wholesale dealers, manufacturers, and special event permits. For a comprehensive understanding of all requirements, categories, and application processes, please consult the Peachtree City Code of Ordinances, Article II.*

***Massage Services:*** *For this declaration, "massage services" are defined according to the Peachtree City Code of Ordinances, Chapter 42 - Health and Sanitation, Article VII. Massage Establishments. This includes but is not limited to, the application of structured touch, pressure, movement, and holding to the body with the intent to enhance health and well-being.*

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**For City Clerk Use only:**

☐ Additional Licensing is required for Alcohol Service.

☐ Additional licensing is required for Massage Services.

☐ No additional Licensing required.

**City Clerk Approval:** _____ **Date:** _____

# OCCUPATIONAL TAX CERTIFICATE APPLICATION

**City of Peachtree City**
151 Willowbend Road, Peachtree City, GA 30269
770-487-7657 www.peachtree-city.org

***Office Use Only***
Receipt #_____
Date Filed: _____/_____/_____
Fee: _____ By:_____
Zoning Verification Approval? ☐
Fire Inspection Approval?: ☐

***Completion of this form does not guarantee issuance of an Occupational Tax Certificate. The City of Peachtree City reserves the right to deny a certificate for documented violations of Peachtree City Codes, delinquent taxes or fees from the business or its owners, or if the business or location fails to meet requirements set forth by the City or applicable state and federal laws. Failure to complete this form in its entirety or provide accurate information will result in rejection of the application.***

**BUSINESS INFO**

Business Name _____
Doing Business As (DBA) _____ Opening Date:_____
Business Description _____
***Do you collect sales tax?*** ☐ ***No*** ☐ ***Yes*** Sales Tax Certificate #(9 digit) _ _ _ _ _ _ _ _ _
Will you be serving alcohol? No Yes
State License#(***if applicable/provide copy of license***)_____ SIC Code: ___ ___ ___ ___
Phone _____ Fax _____
***Email Required for Every Business****_____

**BUSINESS TYPE**

☐ Home Based
☐ Non-Home Based
☐ Non-Profit\Exempt
***Provide Documentation of Non-Profit/Exempt Status***

**Subdivision\Retail Center\Building:**

**BUSINESS LOCATION**

**Physical Street Address Only – P.O. Box / Mail Box NOT ACCEPTED**

Address _____
Suite _____
City _____
State _____ Zip _____

**MAILING ADDRESS**

***Mailing Address same as Physical Address?*** ☐ **Yes** ☐ **No**

Address _____
City_____State _____ Zip _____
Contact Name _____
Contact Phone _____
Contact Email _____

**OWNER**

Name _____
Phone _____
Email _____

**MANAGER**

Name _____
Phone _____
Email _____

**EMERGENCY CONTACT / KEY HOLDER**: Name: _____ Phone: _____

***Note: Non-Home Based must register with Fayette County 911. All Alarms must be registered with the Peachtree City Police Department, 770-487-8866.***

**NON-PROFIT \ EXEMPT**

**Fee:** Annual Administrative Fee Only = $ 20.00
*If this business is claiming Non-Profit\Exempt status, photocopied documentation is required at time the application is submitted or renewed.*

***Is the photocopied documentation attached to this application?*** ☐ ***Yes*** ☐ ***No***

**FEE**

| | |
|---|---|
| **# of Full-Time (40-hr) Employees**<br>(Two 20-hr employees = 1 full-time employee) | |
| | |
| **TOTAL OCCUPATIONAL TAX DUE =**<br>(SEE CHART ENCLOSED)<br>(Min Payment $107 \| Max Payment $6,176) | **$** |

Renewal notices are mailed out each November. If you do not receive a renewal notice, remember it is **YOUR** responsibility to pay your fee by **December 31** for the following calendar year.

**FAILURE TO RENEW PRIOR TO THE DEADLINE WILL RESULT IN PENALTIES.**

Payment methods: Cash, Check or Credit Card.

****Information provided on this form is subject to disclosure as a public record under the Georgia Open Records Law (excluding email).***

**I certify that I am the Owner/Agent of this business and that all information provided as a part of this application is true and correct. If this business is Home-Based as checked above, I certify that I have received a copy of the regulations governing the operation of a home occupation and that I understand these regulations.**

**Signature of Owner/Agent:** _____ **Date** _____

*Office Use Only:* Stormwater OK? Yes ☐ No ☐ *Initials* _____

FINANCIAL SERVICES
151 WILLOWBEND ROAD
PEACHTREE CITY, GA 30269
PHONE: 770-487-7657 FAX: 770-631-2505
WWW.PEACHTREE-CITY.ORG

# Systematic Alien Verification for Entitlements (SAVE)

**Affidavit Verifying Status for**
**City Public Benefit Application**

By executing this affidavit under oath, as an applicant/representative, for a City of Peachtree City, Georgia Business License or Occupational Tax Certificate, Alcohol License, Taxi Permit, or other public benefit 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 Peachtree City Occupational Tax Certificate, Alcohol License or other public benefit

**Company Name:** _____

**Applicant Name:** _____

**CHOOSE ONLY ONE:**

1) _____ I am a United States citizen

2) _____ I am a legal permanent resident* of the United States 18 years of age or older, please include Alien Registration Number here:_____

3) _____ I am a 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. Please record identifying number here:_____

* 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.

In making the above statement 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 OCGA Section 16-10-20, and face criminal penalties allowed by such statue.

**NOTARIZATION REQUIRED**:

_____ _____
Signature of Applicant/Representative (MUST be signed in front of Notary) Date of Birth

_____ _____
Printed Name Date

Contact Phone:_____

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

_____
Notary Public
My Commission Expires: _____

*Revised 10-2014*

FINANCIAL SERVICES
151 WILLOWBEND ROAD
PEACHTREE CITY, GA 30269
PHONE: 770-487-7657
FAX: 770-631-2505
WWW.PEACHTREE-CITY.ORG

# E-Verify *(All Businesses must complete this form)*

**Private Employer Affidavit Pursuant to O.C.G.A. § 36-60-6(d)**

*By executing this affidavit under oath, as an applicant for a Peachtree City (check one):*

_____ ***Occupational Tax Certificate*** _____ ***Alcoholic Beverage License***

**Company Name:** _____

**Applicant Name:** _____

*Applicant verifies one of the following with respect to the application for the above mentioned document:*

**Fill out this section:**

1. _____ On January 1st of the below signed year the individual, firm, or corporation employed ***LESS*** than ten (10) employees

2. _____ On January 1st of the below signed year the individual, firm, or corporation employed ***MORE*** than ten (10) employees. ****please input your e-verify # here*** **** we must have this number if you have 10 or more employees*****

_____ _____
E-Verify Company ID Number (all numbers, no alpha) Date of Authorization

**The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6(a). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as listed above.**

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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 allowed by such statute.

_____ _____
Signature of Applicant/Representative Date
*(this must be signed in front of notary)*

_____
Printed Name and Title of Authorized Agent

_____
Contact Phone Number

*SUBSCRIBED AND SWORN BEFORE ME ON THIS*
*_____DAY OF_____, 20____.*

_____
Notary Public
*My Commission Expires:* _____

*REVISED 2-2014*

# FAYETTE COUNTY E 9-1-1 COMMUNICATIONS

# EMERGENCY CONTACT FORM

**Please note that this form is not needed for home-based businesses**

**Name of Business**: _____

**Business Address**: _____

_____

**Prior Address of Business (if applicable):** _____

_____

**Business Phone Number:** _____

**Business Owner(s) Name:** _____

**Owner(s) Phone Number**: _____

**Building Owner:** _____

**Building Owner's Phone Number**: _____

**Emergency Contacts** *(Someone who can gain access to the business after normal business hours in case of Fire, Burglar Alarm, or Other Emergency):*

1. **Name:** _____ **Phone #:** _____
2. **Name**: _____ **Phone #:** _____
3. **Name:** _____ **Phone #:** _____

**Please return a copy of this form to:**

*Fayette County E 9-1-1 Communications*
*140 Stonewall Avenue, West*
*Fayetteville, GA 30214*
*770-461-4357*

**Peachtree City Occupational Tax Payment Chart**

| *Full-Time Equivalent Employees* | **Pay:** | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ***1-4*** | $ 107.00 | | ***56*** | $ 1,084.00 | | ***110*** | $ 2,110.00 | | ***164*** | $ 3,136.00 | | ***218*** | $ 4,162.00 | | ***272*** | $ 5,188.00 |
| ***5*** | $ 115.00 | | ***57*** | $ 1,103.00 | | ***111*** | $ 2,129.00 | | ***165*** | $ 3,155.00 | | ***219*** | $ 4,181.00 | | ***273*** | $ 5,207.00 |
| ***6*** | $ 134.00 | | ***58*** | $ 1,122.00 | | ***112*** | $ 2,148.00 | | ***166*** | $ 3,174.00 | | ***220*** | $ 4,200.00 | | ***274*** | $ 5,226.00 |
| ***7*** | $ 153.00 | | ***59*** | $ 1,141.00 | | ***113*** | $ 2,167.00 | | ***167*** | $ 3,193.00 | | ***221*** | $ 4,219.00 | | ***275*** | $ 5,245.00 |
| ***8*** | $ 172.00 | | ***60*** | $ 1,160.00 | | ***114*** | $ 2,186.00 | | ***168*** | $ 3,212.00 | | ***222*** | $ 4,238.00 | | ***276*** | $ 5,264.00 |
| ***9*** | $ 191.00 | | ***61*** | $ 1,179.00 | | ***115*** | $ 2,205.00 | | ***169*** | $ 3,231.00 | | ***223*** | $ 4,257.00 | | ***277*** | $ 5,283.00 |
| ***10*** | $ 210.00 | | ***62*** | $ 1,198.00 | | ***116*** | $ 2,224.00 | | ***170*** | $ 3,250.00 | | ***224*** | $ 4,276.00 | | ***278*** | $ 5,302.00 |
| ***11*** | $ 229.00 | | ***63*** | $ 1,217.00 | | ***117*** | $ 2,243.00 | | ***171*** | $ 3,269.00 | | ***225*** | $ 4,295.00 | | ***279*** | $ 5,321.00 |
| ***12*** | $ 248.00 | | ***64*** | $ 1,236.00 | | ***118*** | $ 2,262.00 | | ***172*** | $ 3,288.00 | | ***226*** | $ 4,314.00 | | ***280*** | $ 5,340.00 |
| ***13*** | $ 267.00 | | ***65*** | $ 1,255.00 | | ***119*** | $ 2,281.00 | | ***173*** | $ 3,307.00 | | ***227*** | $ 4,333.00 | | ***281*** | $ 5,359.00 |
| ***14*** | $ 286.00 | | ***66*** | $ 1,274.00 | | ***120*** | $ 2,300.00 | | ***174*** | $ 3,326.00 | | ***228*** | $ 4,352.00 | | ***282*** | $ 5,378.00 |
| ***15*** | $ 305.00 | | ***67*** | $ 1,293.00 | | ***121*** | $ 2,319.00 | | ***175*** | $ 3,345.00 | | ***229*** | $ 4,371.00 | | ***283*** | $ 5,397.00 |
| ***16*** | $ 324.00 | | ***68*** | $ 1,312.00 | | ***122*** | $ 2,338.00 | | ***176*** | $ 3,364.00 | | ***230*** | $ 4,390.00 | | ***284*** | $ 5,416.00 |
| ***17*** | $ 343.00 | | ***69*** | $ 1,331.00 | | ***123*** | $ 2,357.00 | | ***177*** | $ 3,383.00 | | ***231*** | $ 4,409.00 | | ***285*** | $ 5,435.00 |
| ***18*** | $ 362.00 | | ***70*** | $ 1,350.00 | | ***124*** | $ 2,376.00 | | ***178*** | $ 3,402.00 | | ***232*** | $ 4,428.00 | | ***286*** | $ 5,454.00 |
| ***19*** | $ 381.00 | | ***71*** | $ 1,369.00 | | ***125*** | $ 2,395.00 | | ***179*** | $ 3,421.00 | | ***233*** | $ 4,447.00 | | ***287*** | $ 5,473.00 |
| ***20*** | $ 400.00 | | ***72*** | $ 1,388.00 | | ***126*** | $ 2,414.00 | | ***180*** | $ 3,440.00 | | ***234*** | $ 4,466.00 | | ***288*** | $ 5,492.00 |
| ***21*** | $ 419.00 | | ***73*** | $ 1,407.00 | | ***127*** | $ 2,433.00 | | ***181*** | $ 3,459.00 | | ***235*** | $ 4,485.00 | | ***289*** | $ 5,511.00 |
| ***22*** | $ 438.00 | | ***74*** | $ 1,426.00 | | ***128*** | $ 2,452.00 | | ***182*** | $ 3,478.00 | | ***236*** | $ 4,504.00 | | ***290*** | $ 5,530.00 |
| ***23*** | $ 457.00 | | ***75*** | $ 1,445.00 | | ***129*** | $ 2,471.00 | | ***183*** | $ 3,497.00 | | ***237*** | $ 4,523.00 | | ***291*** | $ 5,549.00 |
| ***24*** | $ 476.00 | | ***76*** | $ 1,464.00 | | ***130*** | $ 2,490.00 | | ***184*** | $ 3,516.00 | | ***238*** | $ 4,542.00 | | ***292*** | $ 5,568.00 |
| ***25*** | $ 495.00 | | ***77*** | $ 1,483.00 | | ***131*** | $ 2,509.00 | | ***185*** | $ 3,535.00 | | ***239*** | $ 4,561.00 | | ***293*** | $ 5,587.00 |
| ***26*** | $ 514.00 | | ***78*** | $ 1,502.00 | | ***132*** | $ 2,528.00 | | ***186*** | $ 3,554.00 | | ***240*** | $ 4,580.00 | | ***294*** | $ 5,606.00 |
| ***27*** | $ 533.00 | | ***79*** | $ 1,521.00 | | ***133*** | $ 2,547.00 | | ***187*** | $ 3,573.00 | | ***241*** | $ 4,599.00 | | ***295*** | $ 5,625.00 |
| ***28*** | $ 552.00 | | ***80*** | $ 1,540.00 | | ***134*** | $ 2,566.00 | | ***188*** | $ 3,592.00 | | ***242*** | $ 4,618.00 | | ***296*** | $ 5,644.00 |
| ***29*** | $ 571.00 | | ***81*** | $ 1,559.00 | | ***135*** | $ 2,585.00 | | ***189*** | $ 3,611.00 | | ***243*** | $ 4,637.00 | | ***297*** | $ 5,663.00 |
| ***30*** | $ 590.00 | | ***82*** | $ 1,578.00 | | ***136*** | $ 2,604.00 | | ***190*** | $ 3,630.00 | | ***244*** | $ 4,656.00 | | ***298*** | $ 5,682.00 |
| ***31*** | $ 609.00 | | ***83*** | $ 1,597.00 | | ***137*** | $ 2,623.00 | | ***191*** | $ 3,649.00 | | ***245*** | $ 4,675.00 | | ***299*** | $ 5,701.00 |
| ***32*** | $ 628.00 | | ***84*** | $ 1,616.00 | | ***138*** | $ 2,642.00 | | ***192*** | $ 3,668.00 | | ***246*** | $ 4,694.00 | | ***300*** | $ 5,720.00 |
| ***33*** | $ 647.00 | | ***85*** | $ 1,635.00 | | ***139*** | $ 2,661.00 | | ***193*** | $ 3,687.00 | | ***247*** | $ 4,713.00 | | ***301*** | $ 5,739.00 |
| ***34*** | $ 666.00 | | ***86*** | $ 1,654.00 | | ***140*** | $ 2,680.00 | | ***194*** | $ 3,706.00 | | ***248*** | $ 4,732.00 | | ***302*** | $ 5,758.00 |
| ***35*** | $ 685.00 | | ***87*** | $ 1,673.00 | | ***141*** | $ 2,699.00 | | ***195*** | $ 3,725.00 | | ***249*** | $ 4,751.00 | | ***303*** | $ 5,777.00 |
| ***36*** | $ 704.00 | | ***88*** | $ 1,692.00 | | ***142*** | $ 2,718.00 | | ***196*** | $ 3,744.00 | | ***250*** | $ 4,770.00 | | ***304*** | $ 5,796.00 |
| ***37*** | $ 723.00 | | ***89*** | $ 1,711.00 | | ***143*** | $ 2,737.00 | | ***197*** | $ 3,763.00 | | ***251*** | $ 4,789.00 | | ***305*** | $ 5,815.00 |
| ***38*** | $ 742.00 | | ***90*** | $ 1,730.00 | | ***144*** | $ 2,756.00 | | ***198*** | $ 3,782.00 | | ***252*** | $ 4,808.00 | | ***306*** | $ 5,834.00 |
| ***39*** | $ 761.00 | | ***91*** | $ 1,749.00 | | ***145*** | $ 2,775.00 | | ***199*** | $ 3,801.00 | | ***253*** | $ 4,827.00 | | ***307*** | $ 5,853.00 |
| ***40*** | $ 780.00 | | ***92*** | $ 1,768.00 | | ***146*** | $ 2,794.00 | | ***200*** | $ 3,820.00 | | ***254*** | $ 4,846.00 | | ***308*** | $ 5,872.00 |
| ***41*** | $ 799.00 | | ***93*** | $ 1,787.00 | | ***147*** | $ 2,813.00 | | ***201*** | $ 3,839.00 | | ***255*** | $ 4,865.00 | | ***309*** | $ 5,891.00 |
| ***42*** | $ 818.00 | | ***94*** | $ 1,806.00 | | ***148*** | $ 2,832.00 | | ***202*** | $ 3,858.00 | | ***256*** | $ 4,884.00 | | ***310*** | $ 5,910.00 |
| ***43*** | $ 837.00 | | ***95*** | $ 1,825.00 | | ***149*** | $ 2,851.00 | | ***203*** | $ 3,877.00 | | ***257*** | $ 4,903.00 | | ***311*** | $ 5,929.00 |
| ***44*** | $ 856.00 | | ***96*** | $ 1,844.00 | | ***150*** | $ 2,870.00 | | ***204*** | $ 3,896.00 | | ***258*** | $ 4,922.00 | | ***312*** | $ 5,948.00 |
| ***45*** | $ 875.00 | | ***97*** | $ 1,863.00 | | ***151*** | $ 2,889.00 | | ***205*** | $ 3,915.00 | | ***259*** | $ 4,941.00 | | ***313*** | $ 5,967.00 |
| ***46*** | $ 894.00 | | ***98*** | $ 1,882.00 | | ***152*** | $ 2,908.00 | | ***206*** | $ 3,934.00 | | ***260*** | $ 4,960.00 | | ***314*** | $ 5,986.00 |
| ***47*** | $ 913.00 | | ***99*** | $ 1,901.00 | | ***153*** | $ 2,927.00 | | ***207*** | $ 3,953.00 | | ***261*** | $ 4,979.00 | | ***315*** | $ 6,005.00 |
| ***48*** | $ 932.00 | | ***100*** | $ 1,920.00 | | ***154*** | $ 2,946.00 | | ***208*** | $ 3,972.00 | | ***262*** | $ 4,998.00 | | ***316*** | $ 6,024.00 |
| ***49*** | $ 951.00 | | ***101*** | $ 1,939.00 | | ***155*** | $ 2,965.00 | | ***209*** | $ 3,991.00 | | ***263*** | $ 5,017.00 | | ***317*** | $ 6,043.00 |
| ***50*** | $ 970.00 | | ***102*** | $ 1,958.00 | | ***156*** | $ 2,984.00 | | ***210*** | $ 4,010.00 | | ***264*** | $ 5,036.00 | | ***318*** | $ 6,062.00 |
| ***51*** | $ 989.00 | | ***103*** | $ 1,977.00 | | ***157*** | $ 3,003.00 | | ***211*** | $ 4,029.00 | | ***265*** | $ 5,055.00 | | ***319*** | $ 6,081.00 |
| ***52*** | $ 1,008.00 | | ***104*** | $ 1,996.00 | | ***158*** | $ 3,022.00 | | ***212*** | $ 4,048.00 | | ***266*** | $ 5,074.00 | | ***320*** | $ 6,100.00 |
| ***53*** | $ 1,027.00 | | ***105*** | $ 2,015.00 | | ***159*** | $ 3,041.00 | | ***213*** | $ 4,067.00 | | ***267*** | $ 5,093.00 | | ***321*** | $ 6,119.00 |
| ***54*** | $ 1,046.00 | | ***106*** | $ 2,034.00 | | ***160*** | $ 3,060.00 | | ***214*** | $ 4,086.00 | | ***268*** | $ 5,112.00 | | ***322*** | $ 6,138.00 |
| ***55*** | $ 1,065.00 | | ***107*** | $ 2,053.00 | | ***161*** | $ 3,079.00 | | ***215*** | $ 4,105.00 | | ***269*** | $ 5,131.00 | | ***323*** | $ 6,157.00 |
| | | | ***108*** | $ 2,072.00 | | ***162*** | $ 3,098.00 | | ***216*** | $ 4,124.00 | | ***270*** | $ 5,150.00 | | ***324+*** | $ 6,176.00 |
| | | | ***109*** | $ 2,091.00 | | ***163*** | $ 3,117.00 | | ***217*** | $ 4,143.00 | | ***271*** | $ 5,169.00 | | | |