



OCCUPATIONAL TAX CERTIFICATE

Camden County Board of Commissioners

Office of Planning & Development

135 Gross Road, Kingsland, GA 31548

www.camdencountyga.gov

Online Portal:
<https://app.govwell.com/camden-county>

Phone: (912)729-5603 Fax: (912)729-5543 email: permits@co.camden.ga.us

PLEASE COMPLETE ALL LINES

NEW ☐ RENEWAL ☐ LOCATION CHANGE ☐ NEW OWNER ☐ BUSINESS NAME CHANGE ☐

Name of Business: _____

Business location: _____

Mailing Address: _____

Please provide Email: _____

Business Owner(s): _____

Type of Ownership: Sole Proprietor: ☐ Partnership ☐ Corporation or LLC ☐

Corporation Name & Address: _____

Corporate Authorized Agent Name & Email: _____

Address: _____

Business Phone: _____ Corp Phone: _____ Home Phone: _____

Business Federal Tax ID: _____

Are you a citizen of the United States? ☐ Yes ☐ No – If No Please ask for SAVE form and complete

If your business is required by law to have a Georgia Sales Tax Number enter number _____

Dominant Type of Business: _____ Other Types of Business: _____

If a State Board Certification License Is Required Attach a Current Copy. Exp. Date: _____

Total Number of Owners & Employees: _____ Tax: \$ _____

THE NUMBER OF EMPLOYEES IS DETERMINED BY: An employee who works 40 hours or more weekly shall be considered a full-time employee. The average weekly hours of employees who work less than 40 hours weekly shall be added and the sum divided by 40 to produce full time position equivalents. A business shall figure it's number of employees based on the calendar year operations preceding the levy of the tax, or for the period if in business for less than one year. Example: A business has eight employees-Two full-time and six part-time. The number of full-time equivalent employees is as follows:

2 full time employees = 2 employees

2 employees at 10 hours per week = 20 hours

4 employees at 15 hours per week = 60 hours

80 hours divided by 40 hours = 2 employees

TOTAL NUMBER OF FULL-TIME EMPLOYEE = 4 Employees

(Fee Schedule on back)

Required E Verify number: _____ (If you have more than 10 employees)

Administrative Fee: + **50.00**

Make checks payable to Camden County Board of Commissioners

We also accept money orders, credit cards and cash

Total Due \$ _____

If you cease or close this business or have a location change you must report it immediately.

The Certificate issued expires December 31st. Renewals are due January 2nd. Penalties apply on March 1st

By signing below, you certify you are the person duly authorized to file this application, and all required schedules and statements and that the same is true, correct and complete.

APPLICANT'S PRINTED NAME & SIGNATURE

DATE

Occupational Tax Fees

Sec. 54-33. Administrative and regulatory fee structure; occupation tax structure.

on file in the office of the county clerk shall be required on all business and occupation tax accounts for the initial setup, renewal or reopening of these accounts.

(Ord. of 11-14-2006)

Sec. 54-34. Occupation tax levied; restrictions.

occupations with one or more locations or offices in the unincorporated part of the county and/or upon the applicable out-of-state businesses with no location or office in the state pursuant to O.C.G.A. § 48-13-7 based upon the following criteria:

	Admin Fee	Tax Liability						
People Employed	Jan 1 - Dec 31	Jan 1 - Jun 30		July	Aug	Sept	Oct	Nov
0--5	\$50.00	\$100.00		\$ 50.04	\$ 41.70	\$ 33.60	\$ 25.02	\$ 16.68
6--15	\$50.00	\$175.00		\$87.57	\$72.98	\$58.80	\$43.79	\$29.19
16--30	\$50.00	\$275.00		\$137.61	\$114.68	\$92.40	\$68.81	\$45.87
31--50	\$50.00	\$375.00		\$187.65	\$156.38	\$126.00	\$93.83	\$62.55
51 or more	\$50.00	\$475.00		\$237.69	\$198.08	\$159.60	\$118.85	\$79.23
				50%	42%	34%	25%	17%

Sec. 54-50. More than one place or line of business.

one line, such business shall be required to obtain the necessary registration for each location and line and pay an occupation tax in accordance with the prevailing taxing method and tax rate for each location and line. (Ord. of 11-14-2006)

O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a Business Occupation Tax Certificate, Alcohol Beverage License, or other public benefit as referenced in O.C.G.A. § 50-36-1, from Camden County, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) ☐ I am a United States citizen.
- 2) ☐ I am a legal permanent resident of the United States.
- 3) ☐ 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:_____.

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)(1), with this affidavit. Please see reverse side for a list of acceptable documents, for example, government issued picture id such as a driver's license.

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.

Executed in _____ (city), _____ (state).

Signature of Applicant

Printed Name of Applicant

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

NOTARY PUBLIC
My Commission Expires:

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

☐ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

☐ A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

☐ A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

☐ A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

☐ A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

☐ A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

☐ In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)].

The document provided can be emailed, faxed or delivered in person only. It cannot be mailed.

If you have *less* than 10 employees, complete this affidavit.

If you have *more* than 10 employees, enter your E-verify number on the registration form.

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 _____, _____, 202__ in _____(city), _____(state).

Printed Name of Exempt Private Employer (Business Name)

Signature of Exempt Private Employer or Authorized Officer or Agent

Printed Name and Title of Person Executing Affidavit

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 202__

NOTARY PUBLIC

My Commission Expires:

* This affidavit is for submissions made on or after to July 1, 2013.