

**OCCUPATIONAL TAX INFORMATION SHEET AND BUSINESS REGISTRATION FORM  
CITY OF LAGRANGE**

All businesses operating in the City of LaGrange shall be assessed with an occupational tax. All businesses operating in the City shall also register the business name, location, phone number and contact. The occupational tax in LaGrange will be the sum of:

- An administrative and flat tax of \$110.00
- If you receive a 1099 tax form you are required to pay an occupation tax

Certain regulated business will be notified separately of an additional application and fee requirements.

Complete the information at the bottom of this sheet for each business location in LaGrange. Remember that the **\$110** (dollars) is for each location. Make payment payable to the City of LaGrange, mailing address:

**200 Ridley Ave Rm 202 LaGrange, GA 30240**, send form along with the information at the bottom for each business location. Or, you may come by the Community Development Department, Occupation and Permits Office, Rm. 202 to file your tax payment.

**RENEWEL PAYMENTS MUST BE MADE BY JANUARY 1<sup>ST</sup>** which will include an employee tax based on number of employees. Penalties and interest will be applied beginning Feb 1. Once payment has been received you will have completed your occupational tax filing for the City of LaGrange. Please call the Occupation Tax and Permits Department office at 706-883-2060, if you have any questions or require assistance. Fax: 706-883-2048

**PLEASE COMPLETE AND REMIT WITH PAYMENT TO COMMUNITY DEVELOPMENT DEPARTMENT, P.O. BOX 430, LAGRANGE, GA 30241**

|  |  |
|--|--|
| Business Name: _____                               |  |
| *NAIC # _____                                      | State of GA Professional license # _____ |
| Address of Business: _____ LaGrange, GA _____      |  |
| Manager's name _____                               | */Telephone # _____ *                    |
| Personal Address: (include city/state/zip) _____ * |  |
| Business Mailing Address if Different: _____       |  |
| E-mail Address _____                               | Website/URL _____                        |
| Applicant's Name: (Print Name) _____ *             |  |
| Bus Telephone Number: _____                        | Fax: _____                               |
| Nature of Business:*                               |  |

\*Owner of Business \_\_\_\_\_ \* \_\_\_\_\_  
*AFTER HOURS PHONE NUMBER*

**\* REQUIRED**

**\*PROOF OF PAYMENT FOR REAL AND PERSONAL PROPERTY TAXES IS REQUIRED AS A CONDITION OF APPLICATION FOR OCCUPATIONAL TAX/REGULATORY LICENSE, A FIRE SAFETY INSPECTION IS REQUIRED (706-883-2659), GREASE TRAP INSPECTION 706-883-2119 (restaurants & car washes). BUILDING INSPECTION ALSO REQUIRED 706-883-2060. ALL APPLICABLE FORMS MUST BE SIGNED AND NOTARIZED.**

NOTE: Failure to pay applicable fees, to submit the tax payment within the time period required, to make a true return, or to submit accurate records shall result in revocation of registration and or the imposition of legal penalties.

APPLICAN'T SIGNATURE:

Business License Administrator:

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_