## Community Development Department 38 WEST MAIN STREET FORSYTH, GA 31029 478-994-7040 / MONROECOGA.ORG BUSINESS LICENSE APPLICATION

Please read all the information before completing this form

- 1. Monroe County does not require business license currently but is it offered.
- 2. Monroe County does not issue tax identification numbers (federal or state) or anything regarding the State of Georgia (sos.ga.gov).
- 3. Should you receive a license from Monroe County, remember that this does not take the place of any State or Federal license.
- 4. If your home is located within the City Limits, you will need to contact Planning and Zoning with the City of Forsyth. (478)-994-7747.
- 5. If your business requires zoning verification and your property is not currently zoned for the business—please know that you will be required to follow the zoning change request process to become compliant.
- 6. Each license will expire on December 31<sup>st</sup> of each year and our office does not send out renewals.
- 7. If you are not the business owner you must have documentation proving you are able to apply for the license.

Please answer the following questions and fill out the application entirely.

- □ New license
- Renewal

Are you a Monroe County resident?

- □ Yes
- **D** No (a)
- a. If no, you must be a resident of Monroe County before receiving a license through Monroe County

Will your business be online?

- Yes
- □ No (b)
- b. If no, explain:

Will your business have any traffic flow? (i.e., customers, vehicles, anything other than those who are in the household)

- □ Yes (c)
- 🛛 No
- c. If yes, explain:



Will you require rezoning? (i.e., this question generally relates to car sales and may not be applicable to you)

 $\Box$  Yes (d)

No

\_\_\_\_

d. If yes, explain:

Will you be parking, storing, or operating heavy equipment?

- $\Box \quad \text{Yes (e)}$
- No
- e. If yes, explain:

## Will the business be located on the licensee's property?

- □ Yes
- □ No (f)
- f. If no, place address:

## Please explain your business:

Applicant Information (Information will not appear on the license. Record keeping only.) Applicant Name: \_\_\_\_\_ **Applicant Address** Physical: Mailing: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Are you the business owner as well? **U** Yes **D** No If no, please state your position: \_\_\_\_\_ **#7** Business owner documentation needed



License Information (Information below v	will appear on the license)		
Business Owner Name:			
Business Name:		_	
(Spell it the way <u>YOU</u> want it on the licen	se)		
Business Address			
Physical:			
Mailing:			
Phone Number:			
Optional Information			
Email Address:	Website:		
State ID Number: Refer to # 2 if needed	Tax Exempt Number:		
Applicant Signature:		Date:	
Business Owner Signature:		Date:	

## The fee is \$125.00 (check, cash, or card)

Questions?	
Kelsey Fortner	
Community Development Manager	
478-994-7040 / kfortner@monroecoga.org	

