

Information Sheet-For Business License in Worth County.

OCCUPATIONAL, PROFESSIONAL, or REGULAR CERTIFICATE

- Zoning classification is vital part of acquiring a business license. Get your tax map and parcel number to check your zone classification.
- Define the nature of your proposed business in detail. For Example: what is the proposed name, the storage of any materials or stock items, are you bonded or insured for your type of business (NOTE: Worth County recommends \$100,000.00 liability insurance), number of employees, deliveries to and from residence (if applicable), etc.?
- When you have the above information request an application for a license from our department. Complete and give a good contact number in case we have questions regarding your application.
- Entire process can take up to 3 business days as if more information maybe required.
- If approved you will be required to pay the prescribed fee of the proposed business type.
- The fees are described as follows:

Occupational Tax Certificate	\$80.00 plus \$5.00 for each employee (not to exceed \$250.00)
Professional License (Doctors, Lawyers, Etc.)	\$250.00
Regulatory License Contractors/subcontractors, etc.	\$125.00

- Renewal will be mailed out each November

Denise Newton

Worth County Zoning Administrator

Affidavit Verifying Status for County Public Benefit Application

By executing this affidavit under oath, as an applicant for a County of Worth, Georgia Business License or Occupation 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 County of Worth, Business License or Georgia Occupational Tax Certificate, Alcohol License, Taxi Permit or other public (circle one) for _____

[Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity.]

1) _____ I am a United States Citizen

or _____

2) _____ I am a legal permanent resident 18 years of age or older or I am an otherwise 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.*

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 Code Section 16-10-20 of the Official Code of Georgia.

Signature of Applicant _____

Date _____

Printed Name _____

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

*

Alien Registration number for non-citizens

Notary _____

*Note: 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 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 registration number may supply another identifying number below.

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

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. § 36-60-6(d):

Section 1 Please check only one:

(A) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed more than ten (10) employees¹.

*** If you select Section 1(A), please fill out Section 2 and then execute below.

(B) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed ten (10) or fewer employees.

*** If you select Section 1(B), please skip Section 2 and execute below.

Section 2.

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. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

Name of Private Employer

Federal Work Authorization User Identification Number

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires: _____

¹To determine the number of employees for purposes of this affidavit, a business must count its total number of employees company-wide, regardless of the city, state, or country in which they are based, working at least 35 hours a week.

HOW TO OBTAIN A FEDERAL TAX ID NUMBER FOR YOUR BUSINESS

Visit <http://www.taxid-gov.us> and follow the steps to apply online or you can call the Business & Specialty Tax Line at (800) 829-4933. Their hours of operation are 7:00 a.m. - 7:00 p.m. local time, Monday through Friday. Note: International applicants must call (267) 941-1099 (Not a toll-free number).