

**TOWN OF BLYTHEWOOD
POST OFFICE BOX 1004
BLYTHEWOOD, SC 29016
(803) 754-0501 - FAX (803) 754-0563**

2023 CONTRACTOR APPLICATION FOR BUSINESS LICENSE

1. BUSINESS NAME: _____
CONTACT NAME: _____
2. MAILING ADDRESS _____
3. BUSINESS ADDRESS: _____
PHONE #: _____ CELL# _____ FAX# _____
4. FEDERAL ID #: _____ STATE TAXPAYER ID #: _____
STATE CONTRACTOR'S LICENSE #: _____ Expiration Date _____
5. TYPE OF CONTRACTING BUSINESS: _____
6. JOBSITE ADDRESS _____ LOT _____ PHASE _____
SUB DIVISION _____ BUILDING PERMIT # _____
7. ONE TIME JOB _____ YEARLY _____ (January 1 - December31)

8. **CONTRACTORS WITH AN ESTABLISHED PLACE OF BUSINESS IN BLYTHEWOOD:**

\$40.00 ON THE FIRST \$2,000 OF CONTRACT AMOUNT (\$1.00 ON EACH ADDITIONAL \$1,000 OR FRACTION THEREOF)

| | |
|------------------------------|----------|
| JOB COST | \$ _____ |
| TOTAL LICENSE FEE DUE | \$ _____ |

9. **CONTRACTORS WITHOUT AN ESTABLISHED PLACE OF BUSINESS IN BLYTHEWOOD:**

\$80.00 ON THE FIRST \$2,000 OF CONTRACT AMOUNT (\$2.00 ON EACH ADDITIONAL \$1,000 OR FRACTION THEREOF)

| | |
|------------------------------|----------|
| JOB COST | \$ _____ |
| TOTAL LICENSE FEE DUE | \$ _____ |

By signing this application for a business license or permit, the applicant agrees to pay all costs of collection of the applicant's unpaid bills owed to the Town of Blythewood. The Town of Blythewood has the right pursuant to the South Carolina Setoff Debt Collection Act to collect any sum due and owed by the applicant through offset of the applicant's state income tax refund. If the Town of Blythewood chooses to pursue debts owed by the applicant through the Setoff Debt Collection Act, the applicant agrees to pay all fees and costs incurred through the setoff process, including fees charged by the Department of Revenue, the Municipal Association of South Carolina, and/or the Town of Blythewood. If the Town of Blythewood chooses to pursue debts in a manner other than setoff, the applicant agrees to pay the costs and fees associated with the selected manner as well.

I CERTIFY THAT ALL INFORMATION STATED ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT THE TOWN ORDINANCE PROVIDES FOR PENALTIES AND LICENSE REVOCATION FOR MAKING FALSE OR FRAUDULENT STATEMENTS ON THIS APPLICATION.

SIGNATURE

TITLE

DATE