



**BUSINESS LICENSE AFFIDAVIT**  
CITY OF MYRTLE BEACH, P O BOX 2468, MYRTLE BEACH, SC 29578  
PHONE (843) 918-1200 FAX (843) 918-1210

This is to certify that I, (printed name) \_\_\_\_\_, being a responsible agent for (business name) \_\_\_\_\_, do certify that I have received and read a copy of the City of Myrtle Beach's

- Tree Protection Ordinance, § 903 of the Zoning Ordinance, and received a copy of "How to Prune Trees", published by the USDA, which incorporates ANSI A300 standards, "Standard Practices for Trees, Shrubs and Other Woody Plant Maintenance."
- Disposal of Solid Waste Information
- Construction Services' Summary of the State of South Carolina License Requirements for Receiving a Building Permit.
- Mobile Business & Mobile Vendor Identification Information
- Home Occupation Ordinance, §204.58 and §1103
- Massage Therapy Rules of Operation
- Solicitation Ordinance
- Apparel Ordinance
- Adult Business
- Temporary Tattoo Regulation
- Safety Plan
- Special Event Regulation

I understand that it is unlawful to place any form of advertisement or solicitation for business in or on a mailbox receptacle. I agree not to place such solicitation or advertisement on a mailbox receptacle.

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE