

**INSTRUCTIONS ON REVERSE**

PAYMENT MUST ACCOMPANY APPLICATION  
(Cash, Check, MasterCard, or Visa Accepted)

**Photo ID required with new application.**

**LICENSE RENEWAL DUE  
APRIL 30  
5% PER MONTH  
PENALTY IS APPLIED  
ON MAY 1ST**

**CITY OF MYRTLE BEACH**

BUSINESS LICENSE DIVISION

P.O. BOX 2468  
MYRTLE BEACH, SC 29578  
921 N. OAK STREET  
(843) 918-1200 FAX (843) 918-1210  
www.cityofmyrtlebeach.com

**APPLICATION FOR A BUSINESS LICENSE**

FOR THE LICENSE YEAR \_\_\_\_\_

**NOT A BUSINESS LICENSE**

LICENSE WILL BE ISSUED IF APPLICATION IS APPROVED

IF BUSINESS IS PERMITTED OR LICENSED BY THE STATE OF SOUTH CAROLINA, A PHOTOCOPY OF THE LICENSE, PERMIT, OR ANY ADDITIONAL DOCUMENTATION MAY BE REQUIRED BY LICENSE INSPECTOR. ALL APPLICABLE SPACES MUST BE COMPLETE BEFORE THE LICENSE WILL BE ISSUED.

D/B/A or TRADE NAME: \_\_\_\_\_

ATTENTION: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

FOR OFFICE USE		
ID#	PROCESSED BY	DATE
RENEW _____	NEW _____	HOSP FEE: YES _____ NO _____
TYPE:	CLASS:	NAICS:
		PM _____
BL	\$ _____	
BLD	\$ _____	
BLP	\$ _____	
RBL	\$ _____	
FEE DUE	\$ _____	
PEN DUE	\$ _____	

**NEW BUSINESS MUST COMPLETE A NEW APPLICATION.  
DO NOT USE OLD BUSINESS' RENEWAL FORM**

**LICENSE FEE:** Do all steps in order to compute amount due. If line C is \$2 Million or less skip steps 3 through 10. See example on reverse.

<b>GROSS INCOME</b> for the _____ Calendar or Fiscal Year as Reported to IRS or Estimate if a New Business.	<b>+</b>	<b>\$</b>	_____	<b>A</b>
<b>MINUS:</b> Gross Income that is Exempt. Exemptions are listed on reverse side.	<b>-</b>	<b>\$</b>	_____	<b>B</b>
<b>GROSS INCOME</b> for License Fee Computation.	<b>=</b>	<b>\$</b>	_____	<b>C</b>
<b>Step 1</b> The First \$2,000 from line C is covered by the Base Fee	<b>\$</b>	<b>2,000.00</b>	<b>Base Fee</b>	<b>= \$ 1</b>
			<b>Rate Charge</b>	
<b>Step 2</b> Amount from line C between \$2,000 and \$2 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 2</b>
<b>Step 3</b> Amount from line C between \$ 2 MILLION and \$10 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 3</b>
<b>Step 4</b> Amount from line C between \$10 MILLION and \$20 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 4</b>
<b>Step 5</b> Amount from line C between \$20 MILLION and \$30 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 5</b>
<b>Step 6</b> Amount from line C between \$30 MILLION and \$40 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 6</b>
<b>Step 7</b> Amount from line C between \$40 MILLION and \$50 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 7</b>
<b>Step 8</b> Amount from line C between \$50 MILLION and \$350 MILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 8</b>
<b>Step 9</b> Amount from line C between \$350 MILLION and \$7.5 BILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 9</b>
<b>Step 10</b> Amount from line C that is over \$7.5 BILLION	<b>\$</b>	_____	<b>X</b>	<b>= \$ 10</b>
<b>Step 11</b> ADD STEPS 1 through 10	<b>GROSS INCOME</b>	<b>= \$</b>	_____	<b>LICENSE FEE = \$ 11</b>
<b>Step 12</b> DECALS: A _____ @ \$2.50 BP _____ @ \$5.00 B _____ @ \$12.50 Limo _____ @ \$5.00 (see instructions)				<b>DECAL FEE = \$ 12</b>
<b>Step 13</b> ADD STEPS 11 and 12				<b>SUBTOTAL = \$ 13</b>
<b>Step 14</b> Plus Late Penalty: _____ month(s) x 5% = _____ % x Step 13 (Max Penalty 30%)				<b>PENALTY = \$ 14</b>
<b>Step 15</b> ADD STEPS 13 and 14				<b>TOTAL AMOUNT = \$ 15</b>

16. LEGAL NAME OF BUSINESS ENTITY: \_\_\_\_\_ and LEGAL FORM OF ENTITY: \_\_\_\_\_

17. PERSON RESPONSIBLE FOR CONDUCT OF BUSINESS: \_\_\_\_\_ and TITLE OF PERSON: \_\_\_\_\_

18. DESCRIBE BUSINESS: \_\_\_\_\_ BUSINESS PH# \_\_\_\_\_ ALT PH# \_\_\_\_\_

19. PHYSICAL ADDRESS: \_\_\_\_\_ TMS # \_\_\_\_\_ LANDLORD NAME \_\_\_\_\_

20. PHYSICAL LOCATION : \_\_\_\_\_ IN CITY \_\_\_\_\_ OUT OF CITY IS BUSINESS A HOME OCCUPATION? \_\_\_\_\_ YES \_\_\_\_\_ NO ANTICIPATED START DATE: \_\_\_\_\_

21. SSN # \_\_\_\_\_ or FED EIN # \_\_\_\_\_ SC RETAIL LIC # \_\_\_\_\_ CLOSED or SOLD and DATE: \_\_\_\_\_

22. CONTRACTOR: \_\_\_\_\_ 333 \_\_\_\_\_ 555 STATE LIC# \_\_\_\_\_ GROUP # \_\_\_\_\_ EXP DATE \_\_\_\_\_ CITY TRADE EXP DATE: \_\_\_\_\_ # \_\_\_\_\_

23. E-MAIL \_\_\_\_\_ ACCOUNTANT/BOOKKEEPER \_\_\_\_\_ PH # \_\_\_\_\_

BY MY SIGNATURE BELOW, I AFFIRM UNDER OATH THAT ALL OF THE INFORMATION STATED ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE THE AUTHORITY TO MAKE THIS APPLICATION. I AFFIRM UNDER OATH THAT ALL ASSESSMENTS, TAXES, FEES, AND PERSONAL PROPERTY TAXES DUE AND PAYABLE TO THE CITY HAVE BEEN PAID. I AFFIRM THAT THE BUSINESS WILL NOT EMPLOY ANY PERSON WHO FAILS TO MEET IDENTITY AND EMPLOYMENT ELIGIBILITY REQUIREMENTS TO WORK IN THE USA. I AFFIRM UNDER OATH THAT I WILL MAINTAIN ACCURATE CONTACT INFORMATION FOR RESPONSIBLE PERSONS ON FILE WITH THE CITY. I UNDERSTAND THAT CITY ORDINANCE PROVIDES FOR PENALTIES AND LICENSE REVOCATION FOR MAKING FALSE OR FRAUDULENT STATEMENTS ON THIS APPLICATION. **I UNDERSTAND THAT THIS APPLICATION FORM IS NOT A BUSINESS LICENSE AND THE BUSINESS LICENSE IS ISSUED AND PRINTED AFTER THIS FORM IS REVIEWED AND APPROVED.**

APPLICANT SIGNATURE

PRINTED NAME

TITLE

DATE

Final Approval: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Form Must Accompany Payment**

Checklist: _____ Form _____ Photo ID _____ Persons Responsible _____ Rental List _____ DHEC _____ ABL _____ Affidavit _____ Wrecker App _____ Registration _____ Insurance _____
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**INSTRUCTIONS FOR COMPLETING BUSINESS LICENSE APPLICATION FORM**  
**PLEASE READ. THIS INFORMATION IS IMPORTANT AND MAY AFFECT YOUR BUSINESS LICENSE.**

**MAKE SEPARATE APPLICATION FOR EACH BUSINESS TO BE LICENSED AT EACH LOCATION. COMPLETED APPLICATION FORM MUST ACCOMPANY REMITTANCE.**

Verify accuracy of information and make corrections where necessary. Business License fees are due April 30 or before commencing business. **Any Business License not renewed by April 30 becomes delinquent** and a penalty of 5% for each month is added until the Business License fee and penalty is paid in full. **ALL** Business License applications are reviewed by the License Official and **NEW** business license applications must be approved by applicable City Departments which include but are not limited to Zoning Division, Construction Services Dept., Fire Dept., and Police Dept., before the business license is issued. A completed business contact form, responsible persons form, and federal or state issued photo identification is required and is a part of the NEW business license application before the business license can be issued. Business License applications are subject to audit and verification of gross income by examination of income tax returns and documents filed with Federal, State, and local government agencies. Additional records may be required if a specific request is made. If an audit shows that any person, firm, or business entity has submitted or filed a false or untrue statement, the cost of the audit as well as any unpaid license fee and penalty will be due and payable to the City of Myrtle Beach. **This application form is not a business license.** If you need disability-related accommodations, please contact Mary McDowell with the City of Myrtle Beach at (843) 918-1200.

**Line 16: LEGAL NAME OF BUSINESS ENTITY, LEGAL FORM OF ENTITY, AND CHANGE OF OWNERSHIP**

Write the legal name of the business entity and the legal form of the entity. Examples of legal forms of entities are Sole Proprietorship, Partnership, Corporation, LLC, LLP, etc. A BUSINESS LICENSE IS NOT TRANSFERABLE WITH A CHANGE OF OWNERSHIP. A transfer of controlling interest shall be considered a termination of the old business and the establishment of a new business requiring a new business license dating back to the time of change and based upon old business gross income. Penalty is applied to a new business that fails to obtain the license at the time ownership changes. Any change to your business that is **NOT** an ownership change must be reported to the Business License Office within ten (10) days of the change date.

**Line 21: BUSINESS CLOSED, BUSINESS SOLD, or BUSINESS NO LONGER CONDUCTED IN THE CITY**

Write the date your business closed, was sold, or stopped working in the City. Sign the application and return to the Business License Office to avoid penalty.

**Line 22: GENERAL CONTRACTORS, SUBCONTRACTORS, TRADESMEN, and SIGN COMPANIES**

If line 22 is marked 333 or 555, you pay your license on the "pay by the job" system. The "pay by the job" system requires you to pay an update fee each time you pull a permit or work in the City. An update fee is the rate charge shown on the face of this form and is computed on each \$1,000 of your gross contract price. Update fees are charged after you have paid the base fee and met the first \$2,000 in gross contract value. Update fees may be paid by mail or in person. If line 22 is marked 333 or 555, report any jobs in the prior year that did not require a permit on line A and renew your license on May 1. Do not list the gross income for the jobs on which update fees have already been paid. **Permits can not be processed in the new license year until your business license has been renewed.** Additional Note: Please call SCLLR in Columbia, SC for any state licensing changes that may affect your business. The phone number for SCLLR is (803) 896-4686.

**Step 12: DECAL FEE—REQUIRED FOR COIN-OPERATED AMUSEMENT/VENDING MACHINES, GAME TABLES, or LIMOUSINES**

A decal is required to be visibly affixed on each amusement/vending machine and game table physically located in the city limits and on the windshield of each limo operating within the city limits. The owner of the machine, game table, or limo is required to purchase the decal. In the appropriate space, list the number of machine(s), game table(s), or limo(s) owned.

- Decal A \$ 2.50 ea. Mechanical vending machine selling one product per machine.
- Decal B \$ 12.50 ea. Electrical vending machine or any machine selling more than 1 item per machine **OR** amusement machine: Video Games, Jukebox, Pinball, etc.
- Decal BP or Limo \$ 5.00 ea. Pool or billiard table, foosball table, skeeball machine, or other game table **OR** each vehicle that is State licensed as a limousine.

**NEW LICENSE AND RENEWAL INSTRUCTIONS**

Physical location marked on line 20 determines the business license rate. **IN CITY:** Physical location or principal place of the business is within the city limits. **OUT OF CITY:** Physical location is not within the city limits; however, business **IS** conducted within the city limits. The physical street address on line 19 determines In City or Out of City. License renewal is based upon prior calendar or fiscal year gross income or a 12 month projected gross income based upon average monthly gross income for a business in operation less than one year.

1st License Year: Write a **conservative but reasonable estimate of gross income from the beginning business date until following April 30** on Line A.

2nd License Year: Write annualized gross income by using either scenario 1 or 2, whichever applies to your business on Line A.

Scenario 1. Business that opened between February and December of the prior calendar year:

Divide the actual gross income earned between February 1st and December 31st by the number of months in business and multiply by 12.

Scenario 2. Business that opened between January and April of the current calendar year:

Divide the actual gross income earned between January 1st and April 30th by the number of months in business and multiply by 12.

Future License Years: Write actual gross income earned in the prior 12 month calendar or fiscal year on Line A.

Note: If business opened during prior calendar year, follow instructions for scenario 1 as shown above.

Deductions or Exemptions from License Fee Computation:

The amount of gross income reported to another city or county for which a **business license fee was paid**. Write this amount on line B.

The amount of State and Federal sales and excise taxes, that **have been included** in gross income. Write this amount on line B.

The amount of escrowed funds or funds which are the property of a third party that **have been included** in gross income. Write this amount on line B.

The amount of gross income **not earned** in the city limits if your office location on line 20 is marked **out of city**. Write this amount on line B.

**DO NOT USE RATE SHOWN IN THE EXAMPLE - CALL FOR YOUR RATE**

The gross income and the license rates shown below are an **EXAMPLE** of how to compute a license fee, decal fee, & penalty if applicable. If the rate is **NOT** printed on your application, **STOP** and call the Business License Office.

Gross Income for the prior Calendar Year or Fiscal Year or Estimated Gross for a New Business	+	\$ 7,600,000.00	<b>A</b>
Minus: Gross Income that is Exempt. Exemptions are listed above.	-	\$ .00	<b>B</b>
<b>GROSS INCOME for License Fee Computation.</b>	<b>=</b>	<b>\$ 7,600,000.00</b>	<b>C</b>
<b>Step 1:</b> The First \$2,000 from line C is covered by the Base Fee		Base Fee = \$ 145.00	<b>1</b>
<b>Step 2:</b> Amount from line C between \$2,000 and \$2 MILLION	▶	\$ 1,998,000.00 X .0060000 = \$ 11,988.00	<b>2</b>
<b>Step 3:</b> Amount from line C between \$2 MILLION and \$10 MILLION	▶	\$ 8,000,000.00 X .0054000 = \$ 43,200.00	<b>3</b>
<b>Step 4:</b> Amount from line C between \$10 MILLION and \$20 MILLION	▶	\$ 10,000,000.00 X .0048000 = \$ 48,000.00	<b>4</b>
<b>Step 5:</b> Amount from line C between \$20 MILLION and \$30 MILLION	▶	\$ 10,000,000.00 X .0042000 = \$ 42,000.00	<b>5</b>
<b>Step 6:</b> Amount from line C between \$30 MILLION and \$40 MILLION	▶	\$ 10,000,000.00 X .0036000 = \$ 36,000.00	<b>6</b>
<b>Step 7:</b> Amount from line C between \$40 MILLION and \$50 MILLION	▶	\$ 10,000,000.00 X .0030000 = \$ 30,000.00	<b>7</b>
<b>Step 8:</b> Amount from line C between \$50 MILLION and \$350 MILLION	▶	\$ 300,000,000.00 X .0015000 = \$ 450,000.00	<b>8</b>
<b>Step 9:</b> Amount from line C between \$350 MILLION and \$7.5 BILLION	▶	\$ 7,150,000,000.00 X .0002400 = \$ 1,716,000.00	<b>9</b>
<b>Step 10:</b> Amount from line C that is over \$7.5 BILLION	▶	\$ 100,000,000.00 X .00006000 = \$ 600.00	<b>10</b>
<b>Step 11: ADD STEPS 1 through 10</b>	<b>GROSS INCOME</b>	<b>= \$ 7,600,000.00</b>	<b>LICENSE FEE = \$ 2,377,933.00</b>
<b>Step 12: DECALS:</b> A <u>2</u> @ \$2.50 BP <u>1</u> @ \$5.00 B <u>1</u> @ \$12.50 Limo <u>1</u> @ \$5.00			<b>DECAL FEE = \$ 27.50</b>
<b>Step 13: ADD STEPS 11 and 12</b>			<b>SUBTOTAL = \$ 2,377,960.50</b>
<b>Step 14: Plus Late Penalty:</b> <u>1</u> month(s) x 5% = <u>5</u> % x Step 13			<b>PENALTY = \$ 118,898.03</b>
<b>Step 15: ADD STEPS 13 and 14</b>			<b>TOTAL AMOUNT DUE = \$ 2,496,858.53</b>

**E  
X  
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For Office Use Only

BL #: \_\_\_\_\_

Date: \_\_\_\_\_

**BUSINESS LICENSE PERSONS RESPONSIBLE FOR CONDUCT OF BUSINESS**

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

**List of ALL Persons Responsible for the Conduct of Business, Agents, Officers, and Incorporators**

**Sec. 11-25.** (e) Specifically in regards to the registration and/or application, the License Official may request a state or federally issued photographic identification, the full and legal name, birth date, gender, personal addresses, contact information for any person, officer, landlord, tenant, property owner, lessor, sub-lessor, or agent pertaining to the business, or any other person who has ownership or financial interest in the business, or any other person who has decisional or management input, consultation, oversight or control of any portion of the business. In the case of a corporation, the License Official may additionally request the true and complete name of the corporation, certified articles of incorporation, the incorporators, agents of service, officers, the state or county of its incorporation and its principal place of business.

**Please make as many copies of this page as needed.** List all incorporators, agents of service, and officers of this business. List all persons having decisional management input, oversight, or control of the business. Any person listed has the authority to make decisions for the business, make changes to and inquire on your business license.

**Business Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title or Position with the Company:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Personal Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title or Position with the Company:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Personal Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title or Position with the Company:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Personal Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title or Position with the Company:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Personal Address:** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_