

**City of Hawkinsville
96 Broad Street
P.O. Box 120
Hawkinsville, GA 31036
(478) 892-3240**

Occupational Tax Application Instructions

- 1. Complete the application and affidavit. The application can be mailed to the above post office box or you may deliver it to City Hall. DO NOT submit payment at this time.**
- 2. Once your application is received it will be delivered to the Building Inspector and Fire Chief for approval.**
- 3. Once approval has been received from the Building Inspector and Fire Chief, the application will be submitted to the City of Hawkinsville Board of Commissioners for approval. Your application will be presented to the Board of Commissioners during their regular monthly meeting which is held the 1st Monday of each month.**
- 4. You will be notified upon approval or denial of your application. If your license is approved you will be responsible for submitting payment in a timely manner.**
- 5. Once your payment has been received, your business license will be mailed or you may pick it up at City Hall.**

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**Occupational Tax Application
Tax Year 2016-2017**

Date: _____

Name of Business: _____

Physical Address of Business: _____

Mailing Address of Business: _____

Phone Number of Owner/Operator: _____

Email address of Owner/Operator: _____

Tax ID Number: _____

SS Number: _____

Description of Business: _____

Number of Employees: _____

Tax Due Per Schedule: _____

I certify that the information reported herein is true and correct.

Signature

Printed Name

Title

Return completed form to:

City of Hawkinsville
P.O. Box 120
Hawkinsville, GA 31036

Applications may also be delivered to City Hall at the physical address listed on this application.

Affidavit Verifying Status for City Public Benefit Application

By executing this affidavit under oath, as an applicant for a **City of Hawkinsville**, Georgia Business 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 City of Hawkinsville Business Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit (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:

*Alien Registration number for non-citizens: _____

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE

_____ DAY OF _____, 20_____

Notary Public _____

My Commission Expires: _____

***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 alien 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 alien registration number may supply another identifying number below:

City of Hawkinsville Occupational Tax Schedule

# of Employees	Occupational Tax	# of Employees	Occupational Tax
1	\$60.00	26	\$517.20
2	\$80.00	27	\$533.40
3	\$100.00	28	\$549.60
4	\$120.00	29	\$565.80
5	\$140.00	30	\$582.00
6	\$160.00	31	\$596.58
7	\$180.00	32	\$611.16
8	\$200.00	33	\$625.74
9	\$220.00	34	\$640.32
10	\$240.00	35	\$654.90
11	\$258.00	36	\$669.48
12	\$276.00	37	\$684.06
13	\$294.00	38	\$698.64
14	\$312.00	39	\$713.22
15	\$330.00	40	\$727.80
16	\$348.00	41	\$735.09
17	\$366.00	42	\$742.38
18	\$384.00	43	\$749.67
19	\$402.00	44	\$756.96
20	\$420.00	45	\$764.25
21	\$436.20	46	\$771.54
22	\$452.40	47	\$778.83
23	\$468.60	48	\$786.12
24	\$484.80	49	\$793.41
25	\$501.00	50	\$800.00

- Amounts include a **\$40.00** administrative fee
 - Maximum amount due is **\$800.00**

ADD 10% TO AMOUNT DUE IF PAYING AFTER JULY 1

NOTE: Full time employees are ALL individuals who work a 40-hour week. Hours of part-time employees are added together and divided by 40 to determine the number of full-time employees.