Renewal License Due Upon Receipt. Penalties will apply after April 30.

www.horrycounty.org

HORRY COUNTY BUSINESS LICENSE DEPARTMENT

Post Office Box 1275, Conway, South Carolina 29528
Telephone (843) 915-5620 Fax (843) 915-6220

I D # _____
Keyed by _____

RENEWAL APPLICATION FOR LICENSE YEAR _____

License will be mailed after approval of renewal.

PLEASE – VERIFY ALL PREPRINTED INFORMATION. ***Make Applicable Changes*** **PRINT ONLY.**

License Owner / Agent:

Corporation Name:

☐ Corporation ☐ Single Owner ☐ Co-Partnership ☐ LLC

Location of Business: _____

Resident Business ☐ Non-Resident Business ☐ (Outside Horry County)

Type of Business: _____

Location Phone # _____

SS # _____ SS # _____

Federal ID # _____

S C Contractors License # _____

S C State Retail License # _____

Email address: _____

If SIC Code is 1500-1799 refer to back. **BUSINESS LICENSE FEE CALCULATION:**

SIC Class Code: _____ SIC Description: _____ Rate Class: _____

GROSS INCOME Sales/Receipts for the Calendar or Fiscal Year _____as Reported to IRS + **$_____ (a)**
(If not in business for 12 months, estimate income for current license year based on 12 months)

MINUS: Income that is reported to another city/county **where a license is obtained** - $_____ (b)

GROSS INCOME for License Fee Computation. ____ **Estimated** ____**Actual** = $_____ (c)
(Round up to next thousand)

If line C is $250,000 or less, do steps 1, and 8 ONLY. Otherwise, do each step in order until level of gross income is reached.

Step 1	The First $250,000 from line C is covered by the Base Fee	$ 250,000.00		Base Fee =	$ _____(1)
Step 2	Amount from line C **between** $250,000 and $1 million	$_____	÷ 1000 = _____ x	=	$ _____(2)
Step 3	Amount from line C **between** $1 million and $2 million	$_____	÷ 1000 = _____ x	=	$ _____(3)
Step 4	Amount from line C **between** $2 million and $3 million	$_____	÷ 1000 = _____ x	=	$ _____(4)
Step 5	Amount from line C **between** $3 million and $4 million	$_____	÷ 1000 = _____ x	=	$ _____(5)
Step 6	Amount from line C **between** $4 million and $5 million	$_____	÷ 1000 = _____ x	=	$ _____(6)
Step 7	Amount from line C **over** $5 million	$_____	÷ 1000 = _____ x	=	$ _____(7)
Step 8	TOTAL (add Steps 1 through 7)			**SUB TOTAL LICENSE FEE**	**$ _____**(8)

AMUSEMENT MACHINES:

Business where machines are located: Gross Receipts $_____ First $250,000 =$_____ **Fee Due: _____**

***Owner of Machine (only)*:** Number of Machines _____ x $_____ = $_____ PLUS $_____ = **Fee Due:_____**

BILLIARD / POOL TABLES *(OWNER OF TABLE ONLY)*

Gross Receipts $_____ First $250,000 = $_____ + # of Tables_____ @ $____ EA = **Fee Due $_____**

Penalty Rates

May 1 – 31 = 5%
June 1 – 30 = 10%
July 1 – 31 = 15%
Aug. 1 – 31 = 20%
Sept. 1 - 30 = 25%
Oct. 1 – 31 = 30% plus $100.00

Mail Form along with check or money order to the above address.

New Owners / Corp. must complete a new application when owner / Corp. changes. **DO NOT** use old owners renewal application.

RECAP OF FEES DUE

A. License Fee Due (from Step 8) $_____
B. Amusement Machines (Fee Due) $_____
C. Billiard Tables (Fee Due) $_____
D. **Plus penalty (see rates)** $_____
E. **Reinstatement Fee (after Sept. 30.)** $_____

Total License Fee Due **$_____**

Make check payable to: Horry County Business License Dept.

I certify under oath that the information given in this license application is true, that the gross income is accurately reported, or estimated for a new business, without any unauthorized deductions, and that all assessments, fees, licenses, property taxes, and any other charges due and payable to the County have been paid. I have obtained County permits and am in compliance with all regulatory codes of Horry County. I understand the County ordinance provides for penalty and license revocation for making false or fraudulent statements on this application.

SIGNATURE	PRINT SIGNATURE	TITLE	DATE

SEE BACK OF RENEWAL FOR IMPORTANT INFORMATION

IMPORTANT INFORMATION

Renewals can be mailed to the address listed at the top of the application.

Only Renewal Applications can be taken to the Horry County Business License Office:

1201 21st Ave. N.
Myrtle Beach, SC

- **"SIC Code 1500 TO 1799"** If you have an SIC code 1500 -1799, you must **report on all work** done that has not been reported to another city or county for a business license. Even if you are not required to have a permit.

- **"Gross Income"** (to report on line "a") pertains to *all* revenue received (or accrued) for a full calendar year and as is reported to the IRS based upon the previous year return **prior to any deductions** or expenses such as cost of goods sold, overhead, etc.

- All **New businesses** are required to have a business license prior to operation in Horry County. Each must estimate their probable **"Gross Income"** (for line "a") beginning from the start date of the business until April 30th. For the second year of operation, the business must again estimate the probable "Gross Income" (line "a") to cover a full year (12 months) of activity. **All additional income over the estimated gross income as filed must be reported, and the additional fees paid, prior to the expiration of the license year for which the estimate was given or penalties will apply.**

- **"Exempt Income"** (line "b") pertains only to revenue that is generated in another county or municipality of which a business license was obtained and the revenue amount was reported. All remaining income (regardless of where it is generated) is reported to Horry County, as per your physical business location address, and is subject to the business license fees.

- **"Change of Address"** A change in address must be reported in writing to Horry County within ten (10) days after the business has moved to a new location. The current license will be valid at the new address until a new license can be issued, provided it is in compliance with the county zoning and building codes. The tax map number of the property (new location of the business) is required. Failure to obtain approval of the county shall invalidate the license.

Business Closure Information:

Business Name: _____

This business is no longer located and/or operating in Horry County as of _____. Please close this business license account.
(Date)

_____ _____ _____ _____
(Signature) (Print) (Title) (Date)

Please note, **if your business:**

1) **Has Federal ID # or FEIN, and**
2) **Files tax returns under that number, and**
3) **Is Located and/or operating in the unincorporated area of Horry County**

Then the business is required to keep a current Horry County business license.