



### Application for Occupational License

Application Date: Month				Day		Year			
Reason For Applying: <input type="checkbox"/> Started New Business <input type="checkbox"/> Purchased On-going Business <input type="checkbox"/> Other (specify below:)									
Date Business Started in St. George:				Month		Day		Year	
Federal Employee ID Number:				Louisiana Sales Tax Number:				<input type="checkbox"/> None- Service Only Business	
Taxpayer Name:				Driver's License Number:					
Mailing Address:				City:		State:		Zip:	
Business Name:				Phone:					
Business Physical Address:				City:		State:		Zip:	
<i>Type of Organization: (Check One)</i>									
<input type="checkbox"/> Sole-Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> LLP – Limited Liability Partnership									
<input type="checkbox"/> LLC - Limited Liability Company <input type="checkbox"/> Corporation – State of Incorporation <input type="checkbox"/> Governmental									
<input type="checkbox"/> Non-Profit									
Name and Address of Agent for Service of Process:									
Business Class Activity:									
<i>Please check one of the following as it applies to your business:</i>									
<input type="checkbox"/> New Building/Structure									
<input type="checkbox"/> Existing Building - If there is a change in use, please answer the following:									
Current Use: _____ Proposed Use: _____									
<input type="checkbox"/> Home Occupation - home-based business conducted for financial gain that involves visitors/employees.									
<input type="checkbox"/> Home Office - home-based workspace for limited-service activities (no visitors or employees)									
<input type="checkbox"/> Short-Term Rental (Airbnb) - <input type="checkbox"/> Owner-Occupied <input type="checkbox"/> Non Owner-Occupied									
<i>Please check any of the following that are applicable to your business:</i>									
<input type="checkbox"/> Alcohol will be served on the premises-									
<input type="checkbox"/> Packaged Sales Only									
<input type="checkbox"/> For Consumption On Premises									
<input type="checkbox"/> Installation of External Signage ( <i>permit required before installation may occur</i> )									



**Home-Based Businesses and Short-Term Rentals:**

Please consult the schedules for relevant information regarding the operational elements of your business. Schedules relating to Home-based businesses can be found at [stgeorgela.gov](http://stgeorgela.gov) under Services/Occupational Licensing. Sign the designated schedule and attach it to your application upon submission.

**Please Note: Your application will not be processed without the attached schedules**

**Business opened on or prior to June 30th of current year minimum payment = \$50.00**

**Business opened on or after July 1 of current year minimum payment = \$25.00**

**Mobile Food Vendor and Peddlers = \$200.00**

***Please read the following carefully before signing and submitting your application.***

- Upon submitting your application, please ensure to include the Articles of Organization, a copy of your driver's license, and if applicable, your Louisiana sales tax certificate. Additionally, please include payment in the form of check, money order or credit card. The credit card authorization form is available on St. George's website.
- A Certificate of Occupancy must be obtained from the St. George permit office in the event of a change in occupancy or ownership of your business.
- Prior to your mandated occupancy inspection by the Building Department, you must obtain requisite approvals from both the St. George Fire Marshal and the Planning and Zoning Department.
- You are obligated to inform the building department should you intend to undertake modifications to the electrical, plumbing, mechanical, or structural components of the building.

*The City of St. George fully complies with Title VI of the Civil Rights Act of 1964 and related statutes and regulations in all programs and activities. Your information and this document may be subject to a request for public records.*

*Applicant agrees to stay in strict compliance with the adopted Zoning Ordinance and Building Code of the City.*

*I affirm that the information on this application and attached schedules are true and correct.*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Email Address