

## DAWSON COUNTY PLANNING AND DEVELOPMENT BUSINESS LICENSE APPLICATION



To start a business in Dawson County, you must obtain an Occupational Tax certificate (business license). Additional permits or licenses may be required, depending on the type of business you plan to operate and the business location. Please submit completed applications to our office.

**Attach and provide copies of all applicable documents according to your business type:**

*Incomplete applications will be returned.*

- State License (contractors, plumbers, electricians, cosmetologists, etc.)
- Federal Identification Number - SS4 Form only ([irs.gov](https://www.irs.gov)) 800-829-4933
- E-Verify Confirmation Document ([e-verify.gov](https://e-verify.gov))
- Georgia Sales Tax Number ([dor.ga.gov](https://dor.ga.gov))
- Food Service Permit (Dawson County Health Department)
- Department of Agriculture Certificate
- Registered Trade Name/DBA – Dawson Clerk of Court
- Corporation or LLC Papers with a copy of annual registration ([sos.ga.gov](https://sos.ga.gov))
- Certificate of Occupancy (new builds & tenant finishes)
- Copy of verifiable documents: provide a copy

The state-required affidavits must be completed and notarized. Affidavits verifying residency status as referenced in O.C.G.A. § 50-36-1(e)(2) and § 36-60-6(d) require a secure and verifiable document such as a driver's license, passport, permanent resident card, etc.

Payments by check are made payable to Dawson County in the amount due at the time of submittal. Please note there is a \$25.00 returned check fee if the payment cannot be processed. We also accept cash, money orders, or Visa & MasterCard.

**New Applications may be mailed to our office, submitted in person, or emailed to [planbusiness@dawsoncountyga.gov](mailto:planbusiness@dawsoncountyga.gov)**

Should applicants have any questions or need assistance, please contact our office from 8:00 am to 5:00 pm, Monday through Friday, or visit our website at [www.dawsoncountyga.gov](http://www.dawsoncountyga.gov).

Please note that the address used for your business cannot be a P.O. Box or UPS Store/Mailbox location. The address used should be the physical location of the company. You can add an additional mailing address later in the application process.

# OCCUPATIONAL TAX APPLICATION

**PLEASE FILL OUT COMPLETELY - LEAVE NO BLANKS**

Phone: 706.344.3604 25 Justice Way - Suite 2322 - Dawsonville, GA 30534

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Type of Business: (check one) Home Office:  Home Occupation:  Commercial:

Type of Ownership: (check one) Partnership:  LLC:  Corporation:  Sole Proprietor:

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

Doing Business As (DBA): \_\_\_\_\_

Dawson 911 Address: \_\_\_\_\_

City/ State/Zip Code: \_\_\_\_\_

Dawson Business Phone: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

Business Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Descriptions of Type of Business and Service(s) Offered: \_\_\_\_\_

\_\_\_\_\_

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## Please Complete and Provide Copies

Federal ID Number: \_\_\_\_\_ Georgia Sales Tax Number: \_\_\_\_\_

State License Number: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

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## **FOR OFFICE PERSONNEL USE ONLY:**

License # \_\_\_\_\_ Date Established \_\_\_\_\_ NAICS Number \_\_\_\_\_

Home Office \_\_\_\_\_ Home Occupation \_\_\_\_\_ Commercial \_\_\_\_\_

TMP # \_\_\_\_\_ Zoned: \_\_\_\_\_ Zoning Verification: \_\_\_\_\_

**BUSINESS LICENSE FEES:**

Home Office: \$100.00

Home Occupations: \$100.00

Commercial: Based on Number of Employees

- 1 Employee is: \$125.00
- 2-9 Employees is: \$250.00
- Employees over 9 please see Business License Fees

**Payment Information:**

Checks (payable to Dawson County) or Email to request invoice for credit card payment. If any fees or occupation tax remain due and unpaid for 90 days from their due date, the person liable for the fees or tax shall be subject to and shall pay a penalty of ten (10) percent of the fees or tax due. Interest on delinquent fees and tax shall be assessed at 1.5 percent for each month or fraction there of delinquency. Consistent delinquencies can also result in an additional \$25.00 Administrative Fee.

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**Applicant Certification**

I \_\_\_\_\_, \_\_\_\_\_, being the member of the business entity listed, declare that the information contained in this application is true and correct to the best of my knowledge. I understand that the business the responsibility of the business owner to maintain a current and active Business License and occupational tax certificate. License expires on the last day of the month it was opened, and should be renewed annually by the end of the grace period, being 90 days after expiration date.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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**Commercial Location Only:**

Outdoor Storage or Outdoor Display: Yes\_\_\_ No\_\_\_ If yes, list products (excluding signs) to be stored or displayed \_\_\_\_\_

Is this a new construction: Yes\_\_\_ No\_\_\_ / sharing space with another business: Yes\_\_\_ No\_\_\_

If yes, list business name: \_\_\_\_\_

Existing Building: Yes\_\_\_ No\_\_\_ / Are you making cosmetic changes: Yes\_\_\_ No\_\_\_

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**Private Employer Exemption Affidavit Pursuant to O.C.G.A. § 36-60-6(d)**

By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs **fewer than eleven employees** and therefore, is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90.

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**I do hereby declare under penalty of perjury that the foregoing is true and correct.**

\_\_\_\_\_  
Printed Name of Exempt Private Employer:

\_\_\_\_\_  
Signature of Authorized Officer or Agent:

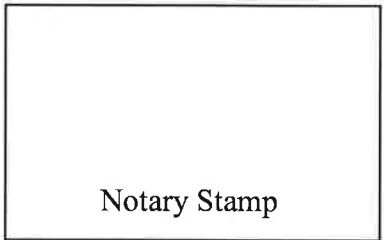
\_\_\_\_\_  
Printed Name and Title of Authorized Officer or Agent:

Subscribed and sworn to me in the city of \_\_\_\_\_ (City), \_\_\_\_\_ (State)

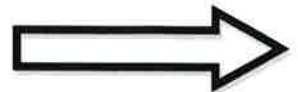
Executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary:

\_\_\_\_\_  
My Commission Expires:



See reverse side Private Employer Affidavit of Compliance



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**Private Employer Affidavit of Compliance Pursuant to O.C.G.A. § 36-60-6(d)**

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs **more than ten employees** and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

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\_\_\_\_\_  
Federal Work Authorization User ID Number:

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

\_\_\_\_\_  
Printed Name of Private Employer:

\_\_\_\_\_  
Signature of Authorized Officer or Agent:

\_\_\_\_\_  
Printed Name and Title of Authorized Officer or Agent:

**I do hereby declare under penalty of perjury that the foregoing is true and correct.**

Subscribed and sworn to me in the city of \_\_\_\_\_ (City), \_\_\_\_\_ (State)

Executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Signature of Notary:

\_\_\_\_\_  
My Commission Expires:

Notary Stamp

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**Affidavit Verifying Residency Status of an Applicant as Required by the Georgia Security and Immigration Compliance Act Pursuant to O.C.G.A. § 50-36-1 (f)(1)**

By executing this affidavit under oath, as an applicant for a Dawson County, Georgia Occupational Tax Certificate or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for a public benefit (check box below):

Occupational Tax Certificate (Business License)

Please check one:

I am a United States Citizen

I am a legal, permanent resident of the United States

I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: \_\_\_\_\_

The undersigned applicant hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e) (1), with this affidavit.

The secure and verifiable document such as a copy of a photo identification, driver's license, passport, permanent resident card, etc., provided with this affidavit can best be classified as: \_\_\_\_\_

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 O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in \_\_\_\_\_ (City), \_\_\_\_\_ (State)

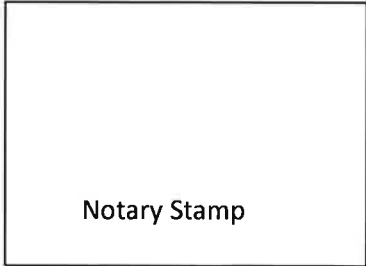
Signature of Applicant: \_\_\_\_\_ Name of Business: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Notary:

\_\_\_\_\_  
My Commission Expires



# HOME OCCUPATION AFFIDAVIT

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**HOME OCCUPATION DEFINED:** Any business, occupation, or activity undertaken for gain or profit within a residential district, **EXCEPT AGRICULTURALLY RELATED USES**, within a residential structure that is INCIDENTAL and SECONDARY to the use of that structure as a dwelling unit or within an accessory structure that is INCIDENTAL and SECONDARY to the use of that structure as attendant to a dwelling unit.

The approval for a Home Occupation shall not “run with the land” and shall terminate with a change in location or ownership of the Home Occupation or ownership of the premises.

## NOTIFICATION:

Before commencement of a Home Occupation, the licensee shall notify, **IN WRITING**, all adjacent property owners; Notification to include **TYPE** of Home Occupation and **COMMENCEMENT DATE**.

### Permitted home occupations. The following activities are permitted as home occupations:

- “Cottage food operators” as defined and licensed by the Georgia Department of Agriculture.
- Personal services, including single chair barber shops, single chair beauty parlors and manicure and pedicure shops, pet grooming, catering, taxidermy services, and chauffeur services.
- Instructional services, including music, dance, art and craft classes, tutoring, and outdoor instruction to include tennis lessons, and swimming lessons.
- Babysitting services, day care homes.
- Studios for artists, sculptors, musicians, photographers, and authors.
- Workrooms for tailors, dressmakers, milliners, and craft persons, including weaving, lapidary, jewelry making, cabinetry and wood working.
- Repair services, including watch and clock, small appliances, computers, and electronic devices.
- Upholstery services if and only if an accessory building on a minimum of three (3) acres may be used for the home occupation.

This list may not be all-inclusive. The planning director shall decide whether an unlisted business is substantially similar to a permitted use based upon the proposed business activity. A maximum of two home occupations may be granted to the same residence.

### Prohibited home occupations. The following activities are prohibited as home occupations:

- Kennels, stables, veterinarian clinics/hospitals.
- Outside obedience training of animals.
- Medical and dental clinics/hospitals.
- Restaurants, clubs, drinking establishments.

- Motor vehicles sales, or storage.
- Repair and service of small internal combustion motors for powered lawn equipment, motorcycles, scooters, all-terrain vehicles, boat motors or construction tools and equipment powered by internal combustion motors; medium and large engine repair.
- Undertaking and funeral parlors and crematoriums: Human or animal cremation facilities.
- Sales of goods to the public from the premises.
- adult business uses (See Dawson County Adult Business Establishment Ordinance)
- Private clubs.
- Warehousing and/or storing of material not directly used in a licensee's home occupation.
- Automotive services.
- Manufacturing processes, including but not limited to, the production of goods industrially, making something into a finished product on a large scale, or producing something with machines in an industrial manner

**Operational standards. The following are operational standards for home occupations**

- *Operating hours* - 8:00 a.m. to 8:00 p.m. The home occupation shall not generate more than ten customer/client visits in any one day nor more than five customers/clients at any one time nor more than two customer vehicles at any one time.
- *Employees* - The home occupation shall have no more than one non-resident employee on the premises at any one time. The number of nonresident employees working at locations other than the premises of the home occupation is not limited
  - *Off-premises employees.* Employees of the home occupation shall not congregate on the premises for any purpose concerning the home occupation.
- *Vehicles* - The home occupation shall be limited to the parking/storage of one commercial vehicle on the premises, not exceeding a one-ton capacity. Any commercial vehicle shall be stored such that the vehicle is not visible from a public street. Parking for all customers/clients/employee shall be restricted to the premises and shall not be permitted on public rights-of-way. The home occupation shall allow for on-site customer/client/employee parking.
  - *Delivery vehicle.* Goods delivered to the home occupation business are limited to passenger vehicles, mail carriers, and express carriers such as UPS and FedEx. Deliveries shall be permitted only between 8:00 a.m. and 8:00 p.m.
- *Nuisances* - The equipment used by the home occupation and the operation of the home occupation shall not create any vibration, heat, glare, dust, odors, or smoke discernible at the property lines at any time and shall not generate any discernible noise at the property lines from 8:00 p.m. to 8:00 a.m.
- *Appearance* - There shall be no exterior indication of the home occupation or variation from the residential character of the principal use. All material stored on premises for the use of the home occupation shall be stored inside a building. All accessory structures shall meet the requirements set forth for the Residential District.



- No vehicles or other receptacles used for the collection, carrying, storage or transport of commercial garbage, waste, trash or recycled material shall be parked or stored on the property.
- *Ownership* - The business owner of the home occupation request shall occupy the dwelling as a principal residence

Is your property located in a subdivision? Yes\_\_\_ No\_\_\_

If yes, are there subdivision covenants? Yes\_\_ No\_\_\_

Subdivision covenants supersede county permissive uses for home occupations unless the county ordinance is more restrictive.

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I \_\_\_\_\_ (print name) do hereby swear and affirm that I have read and understand the restrictions placed on having a Home Occupation; that I will ensure compliance with all regulations governing such business; and that I OCCUPY the dwelling as a principal residence and OWN the premises of the business approved for operation at the following location:

911 Address: \_\_\_\_\_

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

Business Type: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Email: \_\_\_\_\_

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I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT

\_\_\_\_\_  
Signature of Business Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary

\_\_\_\_\_  
My Commission Expires

# HOME OCCUPATION NOTIFICATION

*Before commencement of a Home Occupation, the licensee shall notify, IN WRITING, all adjacent property owners. Notification is to include TYPE of home occupation and COMMENCEMENT DATE. "Adjacent" property owners are those whose property adjoins (touches) yours on all sides. This includes property across the street (as if the road was not there.)*

## TO ADJACENT PROPERTY OWNERS:

The purpose of this letter is to notify you that I have a home occupation business (*describe business*):

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The commencement of this home occupation business is (**date**): \_\_\_\_\_

Sincerely,

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Name of Business Owner

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Name of Business

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Address of Business

## ADJACENT PROPERTY OWNERS:

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Name

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Signature

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Address

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Name

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Signature

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Address

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Name

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Signature

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Address

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Name

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Signature

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Address