



CITY OF BRUNSWICK
 601 GLOUCESTER STREET
 P. O. BOX 550
 BRUNSWICK, GA 31521-0550
 (912) 267-5512

APPLICATION FOR OCCUPATION LICENSE

NAME OF BUSINESS _____
 OWNER'S NAME OR CONTACT _____
 BUSINESS ADDRESS _____
 MAILING ADDRESS _____
 PHONE # _____
 FEDERAL ID # OR SSN# _____
 E VERIFY # _____
 TYPE OF BUSINESS _____
 # of Employees (including owners) _____

**IF YOU ARE REQUIRED TO HAVE STATE CERTIFICATION, A COPY OF THAT
 CERTIFICATION MUST BE SUBMITTED WITH THIS FORM**

# of Owners & Employees	Tax	Admin Fee	Total Due
1-4	60.00	45.00	105.00
5-9	90.00	45.00	135.00
10-19	115.00	45.00	160.00
20-49	175.00	45.00	220.00
50-99	230.00	45.00	275.00
100-249	290.00	45.00	335.00
250+	575.00	45.00	620.00

PERSONALLY APPEARED BEFORE ME _____, WHO FIRST BEING DULY SWORN,
 SAYS THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF H___ KNOWLEDGE
 AND BELIEF.

SWORN TO BEFORE ME THIS _____ DAY OF _____ 20_____

 NOTARY PUBLIC

 APPLICANT



O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a(n) **Occupational Tax License** as referenced in O.C.G.A. § 50-36-1, from the **City of Brunswick** the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) _____ I am a United States citizen.
- 2) _____ I am a legal permanent resident of the United States.
- 3) _____ 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 also 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 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 Brunswick, Georgia.

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE _____
DAY OF _____, 20____

NOTARY PUBLIC

My Commission Expires: _____

If you have *less than 10* employees, complete this affidavit.

If you have *more than 10* employees, enter your E-verify number on the registration form.

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 ten (10) or fewer employees and 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. § 36-60-6.

I hereby declare under penalty of perjury that the foregoing is true and correct. Executed on _____, _____, 201__ in _____(city), _____(state).

Printed Name of Exempt Private Employer (Business Name)

Signature of Exempt Private Employer or Authorized Officer or Agent

Printed Name and Title of Person Executing Affidavit

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:

* This affidavit is for submissions made on or after to July 1, 2013.



Certificate Of Occupancy
Signature Form

Business _____ Address _____

A Certificate of Occupancy is necessary to obtain a business license with the City of Brunswick. The following seven departments must sign this form for the issuance of a Certificate of Occupancy. First, you must go to the BGJWSC building at 1703 Gloucester Street to get the Finance Department, Industrial Pre-Treatment and Backflow Inspector to sign off. Then if your business is with the preparation of food, you need to contact Environmental Health for an inspection and for them to sign off. Afterwards, you need to come to the Building Department, 601 Gloucester Street, to schedule the building/fire inspections of your building.

There is a \$75 fee for the Building Department inspection, and a \$75 fee for the Fire Department inspection which must be paid prior to the inspections.

Brunswick-Glynn County Joint Water
and Sewer Commission

Finance Department
(912) 261-7139

Industrial Pre-Treatment

Compliance Coordinator
(912) 261-7143

Backflow Inspection

Inspector
(912) 261-7142

Coastal District Environmental Health

Health Inspector
(912) 279-2940

Building Department

Building Inspector
(912) 279-2656

Fire Department

Fire Inspector
(912) 280-1219

Planning and Zoning

Planning Manager
(912) 267-5527

Once ALL necessary departments have signed this form and all fees are paid, please come by the Building Department at 601 Gloucester Street (City Hall) to receive your Certificate of Occupancy.