



TENNESSEE DEPARTMENT OF REVENUE
Business Tax Registration Application

RV-F1321001 (04/18)

Answer all questions below completely. Incomplete and unsigned applications will delay processing.

1. Business FEIN or SSN (required) | 2. Start Date for Location in Jurisdiction | 3. Fiscal Year End Date

4. Type of Ownership (choose only one box below):

- Input boxes for Sole Proprietorship, Partnership (all types), Corporation (all types), Marital Joint Ownership, Limited Liability Company (choose one below), Multi-Member LLC, Estate or Trust, Single Member LLC.

5. Legal Name of Business

6. Primary Address (physical address where records are located; no P.O. box) | City | State | ZIP Code

7. Identify Owners, Officers, Members, or Partners (Attach additional names on separate sheet if needed. See Instructions.)

Table with 2 columns for owner information: Title, SSN of owner or FEIN of owning business, if available, First and Last Name of Owner or Name of Owning Business, Telephone Number with Area Code, Email, Address, City, State, ZIP Code.

8. "Doing Business As" (DBA) Name (if different from #5 above)

9. Classification (select below or write in)

Classification:

10. License Type

- Input boxes for Standard Business License, Minimal Activity License

11. Business Location Address (physical address only; no P.O. box) | City | State | ZIP Code

12. Business Activity at this Location

13. Business Mailing Address City State Zip Code

14. Business Telephone Number Business Fax Number Business Email Address

15. Contact Name Contact Telephone Number Contact Email Address

16. **Signatures Required! This application must be signed by an owner, officer, member or partner of the entity listed above. Do not print or use a stamp.**

For Department Use Only

The statements made on this application are true to the best of my knowledge and belief.

Signature: _____ **Date:** _____
Owner, Officer, Member, or Partner

Signature: _____ **Date:** _____
Owner, Officer, Member, or Partner

**Electronic filing and payment of taxes is required for business tax.
Please visit www.TN.gov/revenue for more information.**

THIS APPLICATION MUST BE RECEIVED WITHIN 20 DAYS FROM COMMENCEMENT OF BUSINESS OR PENALTY AND INTEREST WILL APPLY.

Application Fee \$ 15.00
Penalty (5% for each 30 days or fraction thereof not to exceed 25%) _____
Interest (7.25% per annum from delinquent date until paid) _____
Total Payment Due, MAKE CHECK PAYABLE TO CITY OF COLUMBIA \$ _____

PLEASE NOTE: IF YOU CLOSE OR SELL YOUR BUSINESS YOU MUST CONTACT TN DEPT OF REVENUE

***The Columbia City Council has enacted a Zoning Ordinance with certain restrictions and guidelines. Please contact Liz Olmstead in our Grants and Planning Department at Customer Service at City Hall should you have specific questions. The telephone number of the Grants and Planning Department is 931-560-1560.

***One specific restriction we are very interested in is the unlawful use or display of portable signs. Please be aware the placement of these signs on your property is illegal. The only exception is using them as a permanent sign with specific installation and placement requirements. Information to make these signs legal can be obtained from the Grants and Planning Department.

**NOTICE
PLEASE READ CAREFULLY**

The only condition precedent to the issuance of a business license is payment of a business tax. Receipt of this license does not that the location of the business meets the requirements of the municipal zoning, fire, electrical or building code ordinances.

An individual who violates the municipal ordinances listed above cannot use the issuance of a business license as defense. Violations of these ordinances will be enforced as prescribed therein, regardless of the possession or non-possession of the business license required by Tennessee Code Annotated Section 67-4-723.

The City of Columbia urges each person who receives a business license to check with the appropriate officials, including the Director of Grants and Planning, the Fire Chief, and the Building Inspector in order to determine if the location of the business meets the requirements of all municipal ordinances.

CITY OF COLUMBIA

BY Molly Benderman
Molly Benderman, City Recorder

I have read the above Notice, and fully understand that the issuance of a business license does not have any bearing on whether or not the location of my business violates any municipal ordinances.

This the _____ day of _____, 20____.

Signature of Owner

BUSINESS NAME _____
BUSINESS ADDRESS _____

BUSINESS LOCATION VERIFIED BY: _____

“This is an equal opportunity provider.”