



Updated January 2024

CITY OF ALPHARETTA

BUSINESS LICENSE APPLICATION

FOR NON-HOMEBASED BUSINESSES

CHECKLIST FOR COMPLETING APPLICATION PACKET

This checklist is provided for your information and convenience. We recommend that, once you have completed your application packet, you review your answers and materials; comparing that information with the checklist below.

Only when you are able to checkoff every item in the list below will your application packet be complete and ready to be submitted. Please submit the original inked application and affidavits to our office. We cannot accept email or scanned copies.

Application:

- All forms must be completed in full, signed, and notarized.

Entity Documents:

- Articles of Incorporation and/or Organization detailing the company organizational structure, Georgia Secretary of State Registration
- D/B/A "Doing Business As" registration - stamped and notarized from the Fulton County Superior Court *(if applicable)*

Copy Of Legal Photo ID:

- Drivers License, Passport, etc. of applicant swearing and attesting to application and signing affidavits.

Affidavit - Private Employer: *(Required for all applications.)*

- Signed and notarized.

Affidavit - Immigration Status: *(Required for all applications.)*

- Signed and notarized.
(If applicable, include copies of verifiable immigration documentation)

Fire Inspection:

- A current compliant/passed new business license inspection through City of Alpharetta's Fire Marshal's Office. OR a letter from Alpharetta Fire Marshal's Office verifying an inspection is not needed at time of application. Or a copy of your recently issued Certificate of Occupancy that included an inspection. This must be done prior to submitting your application.
(Individual rented/tenant shared work spaces and individual hair stylist rented/tenant chairs are exempt)

Application Fee:

- Payment of Occupational Taxes may be made to the City of Alpharetta in the form of cash, check, or credit card (American Express, Master Card, or Visa only). Checks must be made payable to "City of Alpharetta."
A link for online payment can be provided upon request.

Required Supporting Documentation: *(if applicable)*

- A copy of any applicable professional licenses.
- State/Board/Medical certifications and/or licenses.
- Food Service permit from Fulton County Health Department.
- Co-Working/Shared Space Membership Agreement



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BUSINESS LICENSE APPLICATION FOR NON-HOMEBASED BUSINESSES

All businesses operating within the City of Alpharetta must possess a current Occupational Tax Certificate upon the first day of business. Businesses found to be operating within the corporate limits of the City of Alpharetta without a current City Occupational Tax Certificate shall be subject to fines and penalties as allowed by law.

Completion of this form does not guarantee or grant issuance of an Occupational Tax Certificate. The City of Alpharetta reserves the right to not issue or renew a certificate in cases in which there are documented violations of City Codes and/or Ordinances, other taxes or fees are owed to the City by the business or its owners, or in which the business or location fail to meet requirements set forth by the City of Alpharetta or applicable state and federal laws.

Failure to complete this form in its entirety or provide all required information will result in rejection of the application.

Section 1: General Business Information *(Required for All Applicants)*

Business Name: _____

D/B/A (if applicable): _____

If registering as a D/B/A, the applicant must provide a notarized copy of the Registration of a Business to be Conducted Under a Trade Name as issued by the Clerk of Fulton County Superior Court. <https://www.fultonclerk.org/237/Trade-NamesDBA-Doing-Business-As>

Business Mailing Address: _____

City: _____ State: _____ Zip: _____ - _____

Ownership Structure: _____ Federal ID (FEIN): _____
Sole Proprietor, Corporation, LLC, etc. For information, please visit www.irs.gov/businesses/small

GA Sales and Use Tax # _____ (If your business is required by law to have one.)

(This information will be provided to the GA Department of Revenue) <http://gtc.dor.ga.gov> Go to GTC, then register your new GA Business.

Section 2: Local Physical Location Information *(Required for All Applicants)*

Street Number: _____ Street Name: _____ Suite: _____

City: _____ State: _____ Zip: _____ - _____

Business Telephone Number: _____ Email: _____

Is this a shared co-working space: No: _____ Yes: _____ Name of co-working space provider: _____

(If yes, you will be required to provide a copy of your membership agreement. No licenses will be issued to mailbox accounts or P.O. Boxes)

Section 5: Local Business Contact Information *(Required for all Applicants)*

All applicants must provide the following information for an authorized representative who will be physically located at the address reflected in Section 2 of this form.

Contact Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ - _____ - _____ Email: _____

Section 6: Calculation of Annual Occupation Tax *(Required for All Applicants)*

Your City of Alpharetta Occupational Tax is calculated based upon the number of full-time equivalent employees (FTEs) at this location. For the purposes of this form, two part-time employees shall constitute one full-time employee. A full-time employee shall be defined as anyone working a minimum of 30 hours per week.

Employee means an individual whose work is performed under the direction and supervision of the employer and whose employer withholds FICA, federal income tax, or state income tax from such individual's compensation or whose employer issues to such individual for purposes of documenting compensation a form I.R.S. W-2, but not a form I.R.S. 1099. The term employee also includes owners, partners, officers, or managers who work for a business, whether or not such person is salaried.

Application Date	Month: _____	Day: _____	20 _____	Total FTEs	Tax Due
FTEs at Location:	_____	Minimum of 1		1 to 4	\$ 100
Tax Due:	\$ _____	From Table to Right		5 to 10	\$ 175
Prorate*	_____ %	If Applicable, See Table to Right (Applied to Tax Fee Only. Admin/Fire fee are not prorated)		11 to 25	\$ 300
				26 to 49	\$ 450
Fire Inspection Fee	\$ 75 _____	(unless exempt)		50 and Above *	\$ 150 + \$ 7 per FTE
Administrative Fee:	\$ 50 _____	Mandatory for All Applicants		The maximum tax amount is \$10,000	
Total Due* :	\$ _____	Please Pay This Amount			

* The total amount due will be determined by adding the appropriate "Tax Due" based upon your FTEs at this location as noted in the column at the far right above, the \$75 Fire Marshal's inspection fee, and the \$50 Administrative Fee. The resulting sum should be noted in "Total Due" above.

* Tax Proration Schedule:

(Prorated Tax fee is reduced to a % of regular tax fee)

Jan 1st - June 30th: 0% No Proration

July 1st - Sept 30th: 50% of Tax Fee (+ admin fee)

Oct 1st - Dec 31st: 25% of Tax fee (+ admin fee)

Section 7: Licensed Professionals

Practitioners of certain professions are subject to licensure by the Professional Licensure Division of the Office of the Georgia Secretary of State. To determine if your business is subject to such licensure, please visit the Secretary of State's website at www.sos.state.ga.us or contact the Professional Licensure Division at 478-207-2440.

If the business for which this application is being submitted is subject to licensure by the State of Georgia, a copy of the current state license for the business must be provided and attached to your application at the time of submittal in order for your application to be processed.

Section 8: Sanitation and Recycling (Required for All Applicants)

The City of Alpharetta requires that all businesses recycle a minimum of 25% of the solid waste that they produce. This includes paper, glass, aluminum, cardboard, and metal. The City enforces this ordinance by random on-site auditing of businesses.

Company Providing Sanitation and Recycling Service: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ - _____

Section 9: Swear and Attest (Required for All Applicants)

By completing and submitting this Application for Occupational Tax Certificate I, as a duly authorized agent of the applicant, do hereby swear and attest that all information provided herein is complete and accurate to the best of my knowledge. I and the applicant business agree to abide by all ordinances, rules, and regulations of the City of Alpharetta and acknowledge that City of Alpharetta personnel may enter my commercial property for purposes of inspection and to verify compliance with all applicable ordinances, rules, and regulations. I understand that any false statements on this application shall void the Occupational Tax Certificate.

Authorized Agent Name (Please Print): _____

Signature: _____ Date: _____

The City is required by Georgia law to obtain a copy of Verifiable Identification (e.g. driver's license) with this application.

Payment And Submittal Instructions

- Payment of Occupational Taxes may be made to the City of Alpharetta in the form of cash, check, or credit card (American Express, Master Card, or Visa only). Checks must be made payable to "City of Alpharetta." A link to pay online can be provided upon request.
- Certificate of Occupancy (CO) or Safety Inspections: New construction or newly built-out locations must attach a copy of the new CO to this application. Previously occupied locations will require a New Business License Fire and Life Safety Inspection, the inspection will be conducted after initial set up of the business and not of an empty space. Questions may be directed to 678-297-6272. To request an inspection, please complete the form within this application or visit : <https://www.alpharetta.ga.us/government/departments/public-safety/fire-marshall/inspections-request-form>
- If the business involves food service, a copy of your Fulton County Food Service Permit must be attached to your application.
- Attach all required additional documentation to your completed application. Incomplete applications and/or those missing any required documentation will be rejected and/or denied.
- Complete application packages, including payment, may be mailed or delivered in person to the address below between the hours of 7:30 AM and 4:00 PM Monday through Thursday, 7:30 AM through 3:30 PM Friday. Closed Saturday-Sunday.
*****Please Note: We require the original "wet" inked application and affidavits to be submitted to our office, we cannot accept email or scanned copies of the application or affidavits.**

**City of Alpharetta
Business Licenses & Code Enforcement
2 Park Plaza
Alpharetta, Ga 30009**

For additional information, please call 678-297-6086.
Or email NewBusinessLicense@Alpharetta.Ga.Us

PRIVATE EMPLOYER AFFIDAVIT PURSUANT TO O.C.G.A. § 36-60-6(d)

THIS AFFIDAVIT MUST BE NOTARIZED

By executing this affidavit under oath, as an applicant for an Business Occupation License as referenced in O.C.G.A. § 36-60-6 (d), from the City of Alpharetta Georgia, the undersigned applicant representing the private employer indicated below verifies the following with respect to my application for the above mentioned document.

Printed Name Of Private Employer: _____

Section 1: Please select ONE of the following.

Employs more than ten (10) employees (total employees for Individual, Firm or Corporation). *Please complete section 2 below and sign/notarize at the bottom.*

Employs ten (10) or fewer employees (Individual, Firm, or Corporation). *Do not complete Section 2. Please sign/notarize at the bottom.*

Section 2: The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6(a). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as listed below:

Federal Work Authorization User Identification Number
(Please note, this number is not your FEIN)

Date Of Authorization

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 allowed by such statute.

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

Executed on _____, _____, 20__ in _____ (City) _____ (State)

Signature of Authorized Officer or Agent

Printed Name of Authorized Officer or Agent

Printed Title of Authorized Officer or Agent

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

NOTARY PUBLIC

My Commission Expires

AFFIDAVIT VERIFYING LEGAL IMMIGRATION STATUS

THIS AFFIDAVIT MUST BE NOTARIZED

O.C.G.A. § 50-36-1 states that an agency or political subdivision providing or administering a public benefit shall require every applicant for such benefit to execute a signed and sworn affidavit verifying the applicant's lawful presence in the United States.

By executing this affidavit under oath, as an applicant for a City of Alpharetta public benefit, I hereby state the following with respect to my application for (please check one):

Occupational Tax Certificate (Business License)

(insert business name)

Alcoholic Beverage License

(insert business name)

OR I am a United States citizen. By executing this affidavit, the undersigned applicant verifies the applicant's lawful presence in the United States as the undersigned applicant is a United States citizen 18-years of age or older. The undersigned applicant has provided at least one secure and verifiable document,* as defined by O.C.G.A. § 50-36-2 with this affidavit.

OR I am a legal permanent resident. By executing this affidavit, the undersigned applicant verifies the applicant's lawful presence in the United States as the undersigned applicant is a legal permanent resident 18-years of age or older. The undersigned applicant has provided at least one secure and verifiable document,** as defined by O.C.G.A. § 50-36-2 with this affidavit.

I am a qualified alien or non-immigrant. By executing this affidavit, the undersigned applicant verifies the applicant's lawful presence in the United States as the undersigned applicant is a qualified alien or non-immigrant under the federal Immigration and Nationality Act, Title 8 U.S.C. with an alien number issued by the Department of Homeland Security or other federal immigration agency, and is 18-years of age or older. The undersigned applicant has provided at least one secure and verifiable document,** as defined by O.C.G.A. § 50-36-2 with this affidavit.

Applicant's alien number issued by the Department of Homeland Security Or other federal immigration agency

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

Executed on _____, _____, 20__ in _____ (City) _____ (State)

Signature of Applicant

Printed Name of Applicant

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

NOTARY PUBLIC

My Commission Expires

*Documents include a U.S. driver's license, U.S. passport, U.S. passport card or one of the other documents listed on the Attorney General's list of Secure and Verifiable Documents.

**Documents include a Permanent Resident card (from I-551), Arrival/Departure Record (form I-94), Employment Authorization Document (form I-766) or one of the other documents listed on the Attorney General's list of Secure and Verifiable Documents.

A complete listing of secure and verifiable documents is available through the Office of the Attorney General (GA) website:

<http://law.ga.gov/immigration-reports>.

Alpharetta Fire & Emergency Services
Fire Marshal's Office



2565 Old Milton Pkwy Alpharetta, GA 30009
Email: AlpharettaFMO@alpharetta.ga.us
Phone: 678-297-6272

FIRE INSPECTION REQUIRED BEFORE SUBMITTING THE NEW BUSINESS LICENSE APPLICATION

Alpharetta Fire Department New Business License Inspections

*** A fire inspection is only required for tenants taking over a new building/suite or when there is an occupancy change (e.g. Business to educational). Clerical changes or sub-leases of the same occupancy types are not required to get a fire inspection. ***

Background: All businesses operating within the City of Alpharetta must possess a current Occupational Tax Certificate (also known as a business license) upon the first day of business. Businesses operating within the corporate limits of the City of Alpharetta without a current Occupational Tax Certificate shall be subject to fines and penalties as allowed by law. Prior occupancy of a tenant space or a building without first receiving a fire inspection and approval from the Fire Marshal's Office is prohibited. An inspection must be conducted to verify that the tenant space or the building is appropriate for the proposed business use per O.C.G.A 120-3-3 and local ordinance.

How to Schedule an Inspection: Please visit www.alpharetta.ga.us/FMO to request a New Business License Fire Inspection. You may also scan the QR code below.



Schedule inspection here!

Additional

Attached is a list of examples of what the inspector may look at during your inspection. This list does not include all items they may inspect but will provide items needed to comply with before the inspection. Upon the end of the inspection, the inspector will provide the responsible party with a complete inspection report. A compliant report from the Fire Marshal's Office will be provided to the New Business Licensing Department to release the business license. **Any failure to properly pass a fire inspection before opening for business is solely the responsibility of the holder of the new business license and may result in the Certificate of Occupancy being pulled from the business location.**



The following checklist provides examples of items the Fire Inspector will look for during our Annual and Business License Inspections. This is not an all-inclusive list:

Exterior of the Building/Suite

- ✓ Address/Suite numbers are clearly visible from the street
- ✓ Correct keys in Knox Box
- ✓ Fire Department Access- No parking lanes and signage maintained
- ✓ Fire Hydrants- accessible, visible, and operational
- ✓ Fire Department Connection- accessible and visible with proper signage
- ✓ Outside utilities (gas/electric meter) are labeled in multi-tenant buildings

Interior of Building/Suite

- ✓ Exit Signs are functional, clear, and unobstructed
- ✓ Emergency Lights- functioning properly
- ✓ Fire Extinguisher-Current annual inspection yellow tag on appropriate fire extinguishers
- ✓ Fire Sprinkler System- Current annual inspection green tag on sprinkler riser
- ✓ Fire Alarm is functional, with an annual test report available
- ✓ Kitchen Hood - cleaned, maintained, and operational
- ✓ Kitchen Hood Suppression System- Current bi-annual inspection blue tag on kitchen hood suppression system
- ✓ Exits and Exit Access is clear and accessible
- ✓ Exit Doors are functional and have the correct hardware
- ✓ Doors Signage: on the following rooms- Fire Alarm Control Panel (FACP), fire sprinkler/riser, electrical/mechanical
- ✓ Electrical/Mechanical/Sprinkler Riser rooms- clear of combustible storage
- ✓ Electrical Panel- all circuits labeled, no openings in the panel
- ✓ Electrical switches, outlets, and junction boxes with proper cover plates installed
- ✓ Extension cords are not used for permanent wiring, for temporary use only, and not used on a permanent basis for a permanent power source
- ✓ Power strips are for electronics only and cannot be linked together
- ✓ Proper storage of flammable or combustible liquids
- ✓ General Housekeeping- aisle widths maintained
- ✓ Any other obvious potential fire hazards for occupants or firefighters



Fire Department Record Reporting, The Compliance Engine

The City of Alpharetta requires that all service providers that inspect and maintain fire protection systems electronically upload all compliant & non-compliant reports are required to the Alpharetta Department of Public Safety via **The Compliance Engine at www.thecomplianceengine.com** .

All vendors must upload all relevant reports in accordance with the testing schedule and requirements outlined in the adopted fire code (CoA Ordinance 783). Annual inspection compliance of your business or building cannot be passed until your selected vendors upload all relevant reports. Delayed or non-compliance may result in late fees or additional corrective measures as determined by the Fire Marshal's Office.

The Alpharetta Department of Public Safety is dedicated to delivering 100% compliance with our adopted Fire Code. This web-based service will aggregate, track, and streamline compliance data collection of our jurisdiction's systems. Property/Business owners will receive timely proactive notifications of their testing requirements, and the Alpharetta Department of Public Safety will gain the ability to better mitigate the risk in our community by improving public safety for our citizens.

We look forward to partnering with you to better protect and serve our community.

Systems Required:

- Fire Sprinkler System
- Fire Alarm System
- Commercial Kitchen Hood Suppression System Testing
- Commercial Kitchen Hood Cleaning
- Fire Extinguishers
- Emergency Responder Radio Coverage System
- Standpipe
- Active Smoke Control System
- Private Hydrant System
- Fire Pump
- Spray Booth
- Emergency Generator
- Special Suppression/Clean Agent System
- Fire Escape