



**Henry County Tax Commissioner**  
 140 Henry Parkway  
 McDonough, GA 30253  
 770.288.8180 Option 5  
 www.henrycountytax.com

**Occupational Tax Application**

**Account #:** \_\_\_\_\_

**APPLICATIONS ARE ONLY VALID 60 DAYS FROM SUBMITTAL DATE**

**ALL OCCUPATIONAL TAX CERTIFICATES EXPIRE ON DECEMBER 31<sup>ST</sup> EVERY YEAR**

**FEES ARE ASSESSED AT THE TIME OF SUBMISSION**

**Applicant Information**

Name of Business: \_\_\_\_\_ DBA: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Additional Applicant: \_\_\_\_\_

Business Address: \_\_\_\_\_  
City State ZIP

Mailing Address: \_\_\_\_\_  
City State ZIP

Parcel ID: \_\_\_\_\_ Business Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

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

**Business Information**

Business Location: Home-Based  **Commercial**  Number of Employees: \_\_\_\_\_

If home-based will the business be open to the public? Yes  No

Application is for: New Business, New Construction  New Business, No Construction

Ownership Type: Sole Proprietor  LLC  INC  Partnership

Type of Service Being Provided (Please include a thorough description of what your business does during day-to-day operations): \_\_\_\_\_  
 \_\_\_\_\_

**Personal Property Tax Acknowledgement**

Please read carefully and initial below:

\_\_\_\_\_ I am aware it is my responsibility to file a Personal Property Tax Return with the Tax Assessor's office each year. Failure to file a return could result in a mandatory assessment. Any questions regarding this filing process can be addressed with the Tax Assessor's at (770)288-7999.

Signature: \_\_\_\_\_

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

**Commercial Application – Building and Fire**

Square Footage of Building: \_\_\_\_\_

Please Provide an Extensive Model for the Proposed Business: \_\_\_\_\_

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Hours of Operation: \_\_\_\_\_

Will your business differ from the previous tenant? Yes  No

Do you plan on performing any construction work at the business address? Yes  No

Please provide a brief description of planned or ongoing work: \_\_\_\_\_

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Have permits been applied for? Yes  No  N/A

If yes, please provide SagesGov case number: \_\_\_\_\_

If permit(s) have been issued, provide permit numbers: \_\_\_\_\_

I understand that it is recommended, but not required to request a due diligence meeting with Planning and Zoning, Fire, and Building Department to discuss both the contents of this application as well as the proposed business:

Yes  No

Signature: \_\_\_\_\_

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

**Legal Status and Private Employer Affidavit**

**LEGAL STATUS AFFIDAVIT**

**Please read carefully and check the appropriate box:**

- 1. If you are a United States citizen 18 years of age or older please check below.
- 2. If you are a qualified alien or nonimmigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United State, please attach a copy of your Alien Registration Card and please check #2 below.

Pursuant of Official Code of Ga Annotated (OCGA) sec 50-36-1, verification of legal status is required for the administration of various public services/public benefits as defined in the Ga Security an Immigration Compliance Act (GSICA). Accordingly, applicants for various public benefits must certify of the following.

1. \_\_\_\_\_ The applicant must execute an affidavit that he or she is a United States Citizen 18 years of age or older.  
Or,

2. \_\_\_\_\_ The applicant must execute an affidavit that he or she is a qualified alien or nonimmigrant under the Federal Immigration and Nationality act 18 years of age or older lawfully present in the United States

I, as applicant for public services/public benefits as defined in the Ga Security and Immigration Compliance Act (GSICA) certify my legal status to be in the United States of America as marked above, I understand that there may be state and or federal penalties for providing false information on the affidavit required under the GA Security and Immigration Compliance Act. Alien Registration Number of Non-Citizens: \_\_\_\_\_

**PRIVATE EMPLOYER AFFIDAVIT Pursuant to O.C.G.A. § 36-60-6(d)**

By executing this affidavit under oath, as an applicant for an Occupational Tax Certificate as referenced in O.C.G.A.§ 36-60-6(d), from Henry County, Ga., the undersigned applicant representing the private employer known as \_\_\_\_\_,

verifies one of the following with respect to my application for the above-mentioned document:

**1. Fill out this section if the current date is after July 1, 2013.**

(a) \_\_\_\_\_ On January 1st of the below signed year the individual, firm, or corporation employed more than ten (10) employees. E-Verify# \_\_\_\_\_

(b) \_\_\_\_\_ On January 1st of the below signed year the individual, firm, or corporation employed less than ten (10) employees.

*If the employer selected 1(a) please fill out Section 2 below.*

**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

\_\_\_\_\_  
Date of Authorization

**In making the above representations 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. The granting of this business license or payment of the occupational tax does not waive the right of any federal, state, or local entity to regulate & enforce all laws, ordinances & regulations. I understand it is my company’s responsibility to notify the occupational tax department of any changes or closure involved with this business.**

Executed on the \_\_\_ date of \_\_\_\_\_, 202\_\_ in \_\_\_\_\_ (city), \_\_\_\_\_ (state)

\_\_\_\_\_  
NOTARY PUBLIC \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
MY COMMISSION EXPIRES \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Applicant

Gross Receipts Page for Occupational Tax Calendar Year

DATE: \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

BUSINESS/CORP NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

For this office to calculate the Occupational Tax for business owners in Henry County, the following information is needed. If you have any questions, regarding the information requested, please contact our office at (770) 288-8180 opt 5.

IF THE COMPANY WAS IN BUSINESS THIS WILL BE THE GROSS RECEIPTS FROM OCTOBER 1<sup>ST</sup> OF LAST YEAR TO SEPTEMBER 30<sup>TH</sup> OF THE CURRENT YEAR.

IF YOU WERE NOT IN BUSINESS DURING THE TIME INDICATED, PLEASE ESTIMATE YOUR ANTICIPATED AMOUNT FOR THE NEXT 12 MONTHS BASED ON YOUR BUSINESS PLAN.

GROSS RECEIPTS: \$ \_\_\_\_\_

Title (Relation to Company): \_\_\_\_\_

Signature: \_\_\_\_\_

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

**GEORGIA LAW REQUIRES THAT WE KEEP GROSS RECEIPT INFORMATION CONFIDENTIAL**

## Personal Property Tax Guide – Please Keep for Your Records

### Did you know...

- All business located in Georgia as of January 1<sup>st</sup> of any given year are subject to personal property ad valorem taxation.
- **All businesses are required by law to file the Business Personal Property Tax Return (PT-50P) to the Tax Assessor's Office by April 1<sup>st</sup> of each year.**
- Personal property includes machinery, equipment, furniture, fixtures, inventory, supplies, and construction in progress.
- The most recent inventory schedule and asset list indicating the date of acquisition, original cost, and description of each asset should be submitted with the Business Personal Property Tax Return by **April 1<sup>st</sup>**.
- Returns may be submitted by mail or in person to the Tax Assessors office. If mailing, metered mail will not be accepted as proof of timely filing.
- If the business moves, is sold, or closes the business owner must notify both the Occupational Tax Office (Tax Commissioner) **AND ALSO** the Personal Property Tax Office (Tax Assessor) by completing the annual Business Personal property Tax Return.
- Non-profit businesses must apply for exempt status.
- Late filings will incur a penalty for all new assets or inventory.

### Business Personal Property Tax

| BUSINESS PERSONAL PROPERTY TAX RETURN   |                      | TAXPAYER                  | IF ASSISTANCE NEEDED CALL | ACCOUNT NUMBER |
|---|----------------------|---------------------------|---------------------------|----------------|
| THIS RETURN IS FOR THE PERSON OR PERSONS WHO OWN AND OPERATE THE BUSINESS AND WILL BE SUBJECT TO AD VALOREM TAXATION  |                      | TAXPAYER'S NAME           | 800-371-3737              |                |
| COUNTY NAME AND RETURN ADDRESS  |                      | TAXPAYER NAME AND ADDRESS |                           |                |
| BUSINESS PHYSICAL LOCATION  |                      |                           |                           |                |
| IF MAILING ADDRESS OR NAME IS INCORRECT PLEASE CORRECT IN THE SPACE PROVIDED BELOW  |                      |                           |                           |                |
| NAME  |                      |                           |                           |                |
| ADDRESS   |                      |                           |                           |                |
| CITY, STATE, ZIP  |                      |                           |                           |                |
| <p><b>1. PERSONAL PROPERTY STRATA</b></p> <p><b>1. Furniture/Fixtures/Machinery/Equipment</b> – Includes all fixtures, furniture, office equipment, computer hardware, production machinery of all varieties, farm equipment and implements, tools and implements of manual laborer, tractors, harvesters, implements, personal property in repair and construction in progress (personal property in future).</p> <p><b>2. Inventory</b> – Includes all new materials, goods in process, finished goods, wares and agricultural products, all consumable supplies used in the process of manufacturing, assembling, storing or merchandising of goods and services, their printed inventory and space parts. <i>Does not include Freight Exemption amount granted under O.C.G.A. §§ 48-6-42 and 48-6-43.</i></p> <p><b>3. Freight Inventory</b> – Includes inventory exemption amount under O.C.G.A. §§ 48-6-42 and 48-6-43.</p> <p><b>4. Other Personal</b> – Includes all personal property not otherwise defined above.</p> |                      |                           |                           |                |
| TAXPAYER RETURNED   | INCREASED VALUE FROM | FOR SET                   |                           |                |
| VALUE AS OF JAN 1   | SCHEDULES A, B, & C  | OFFICER                   |                           |                |
| <b>TOTALS</b>   |                      |                           |                           |                |
| It shall be the duty of the county Board of Tax Assessors to investigate and to insure that the property owned in the county for the purpose of assessing that property is subject to taxation and to secure the proper return of the property for taxation.  |                      |                           |                           |                |
| <b>TAXPAYER'S DECLARATION</b>   |                      |                           |                           |                |
| "I do solemnly swear that I have carefully read (or have heard read) and have duly considered the questions propounded in the foregoing list, and that the value specified by me on the property returned, as shown by the list, is the true market value thereof and I further swear that I returned, for the purpose of being taxed thereon, every species of property that I own in my own right or have control of either as agent, executor, administrator, or otherwise, and that in making this return, for the purpose of being taxed thereon, I have not attempted either by transferring my property to another or by any other means to evade the laws governing taxation in this state. Do further swear that in making this return I have done so by estimating the true worth and value of every species of property contained therein."  |                      |                           |                           |                |
| TAXPAYER OR AGENT X _____   |                      |                           |                           |                |
| PLEASE PRINT OR TYPE NAME _____ TOWNSHIP _____  |                      |                           |                           |                |
| TITLE _____ DATE _____ PHONE NUMBER _____ PAGE 1  |                      |                           |                           |                |

## Business Personal Property Tax Timeline

- **January 1** – Date of Assessment
- **April 1** – Business Personal Property Tax Return
- **May** – Notice of Assessments are mailed from the Tax Assessor's Office (this is not a bill)
- **August/September** – Tax bills are mailed by Tax Commissioner's Office
- **October/ November** – Tax bills are due to the Tax Commissioner's Office by November 16<sup>th</sup> every year. The Personal Property Tax bill that you could receive is required to be paid before you can renew your business license per ordinance Sec. 2-4-35.

### QUESTIONS REGARDING ANY OF THE ABOVE INFORMATION CAN BE ANSWERED THROUGH THE FOLLOWING RESOURCES:

Henry County Tax Assessor Office, Personal Property Department

**770-288-7999, option 1**

140 Henry Parkway

McDonough, GA 30253

Instructions on how to complete the Business Personal Property Return can be found at:

<https://www.gpublic.net/ga/henry/forms.html>