

Town of Holly Hill
8423 Old State Road, Suite # 1
Holly Hill, South Carolina 29059-8100
Per Year Business License Application 2018
The undersigned hereby makes application to
the Town of Holly Hill, SC for a BUSINESS LICENSE
Phone Number: (803) 496-3330
Fax Number: (803) 496-5211

Account Number _____

Business Name _____

Type of Business _____

Owner's Legal Name _____

Business' Physical Address _____

City _____ State _____ Zip Code _____

Out of Town (Y) _____ (N) _____ SS#/Fed ID# _____
State Contractor's License Number _____

Job's Physical Address (if different) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Date Business Established _____

Telephone _____ Fax _____ Cell _____

email Address _____

The Gross Sales or Receipts for preceding year ending 20__.

Amounted to _____ and did not exceed the sum of _____

Sworn to me this _____ day of _____, 20 _____.

Signed in the Presence of:

Administrator/Clerk, Town of Holly Hill, SC

Signature of Applicant

****LICENSE DUE ON OR BEFORE APRIL 15, 20__ UPON COMPLETION OF PRIOR YEAR TAX FILING****

LICENSES VALID FROM JANUARY 1 THROUGH DECEMBER 31 OF FILING YEAR

Office Use Only			
SIC _____	Paid _____	Date _____	
Class Code _____	Water _____	Current _____	
License Number _____	Contractor _____	Bldg Permit _____	

Please complete the above form and return via fax to the above number or drop off at Town Hall. Submit original form with original signature with payment.