

License Year \_\_\_\_\_  
Date Prepared \_\_\_\_\_  
License # \_\_\_\_\_

**CITY OF GONZALES  
OCCUPATIONAL LICENSE TAX APPLICATION**

Trade Name Of Business \_\_\_\_\_

Owner's Name \_\_\_\_\_

Phone Number's \_\_\_\_\_ or \_\_\_\_\_

Drivers License Number /Copy of Drivers License \_\_\_\_\_

Social Security Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State & Zip Code \_\_\_\_\_

Physical Address of Business \_\_\_\_\_

If this is a New Business- enter date business started \_\_\_\_\_

Federal Tax ID Number \_\_\_\_\_

Business opened on or prior to June 30 if current year \$50 due  
Business opened on or after July 1 of current year \$25 due

**\*\*IF THIS LICENSE IS FO RENTAL PROPERTY - PLEASE LIST THE NUMBER OF UNITS \_\_\_\_\_\*\***

1. IF BUSINESS WAS Operated During the Entire Previous Year-  
Enter your Gross Sales or Receipts For the Proceeding Year- Here \$ \_\_\_\_\_
2. If the Business Commenced During the Previous Year-  
Enter the Date the business Commenced- Here \_\_\_\_\_
3. Gross Sales for the remainder of the Calendar Year were \$ \_\_\_\_\_  
Divided by the number of days left in the Year \_\_\_\_\_ Equals \$ \_\_\_\_\_  
Which Multiplied by 365 Amounts to \$ \_\_\_\_\_

Base Tax	\$	_____
Penalty	\$	_____
Interest	\$	_____
Total Due	\$	_____

Interest is calculated at the rate of one & one quarter% per month of the tax due from the due date until tax is paid.

Penalty is calculated at the rate of 5% of the tax due of each thirty (30) days, or fraction thereof, from the due date until the application is filed, but is limited to a total of 25%

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Signature for Sign Ordinance

**\*\*\*GIVE COPY OF SIGN ORDINANCE BASED ON TYPE AND LOCATION OF BUSINESS\*\*\***  
Office staff initial \_\_\_\_\_

**CITY OF GONZALES  
OCCUPATIONAL LICENSE APPROVAL**

**BUSINESS** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**DESCRIPTION** \_\_\_\_\_

**SOLD BY** \_\_\_\_\_

**OCCUPANCY INFORMATION**

**PREVIOUS BUSINESS TYPE** \_\_\_\_\_

**NEW BUSINESS TYPE** \_\_\_\_\_

**BUILDING SQUARE FOOTAGE** \_\_\_\_\_

**PARKING SPACES** \_\_\_\_\_

**OCCUPANCY CHANGE** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**CLAY STAFFORD  
ZONING**

\_\_\_\_\_  
**ANTHONY KELLER  
CENTRAL OFFICE DIRECTOR**