RICHLAND COUNTY GOVERNMENT
COMMUNITY PLANNING & DEVELOPMENT
BUSINESS SERVICE CENTER
2020 Hampton Street, Suite 1050, P.O. Box 192, Columbia SC 29202
T 803-576-2287 | F 803-576-2289 | TDD 803-576-2045
bsc@richlandcountysc.gov | richlandcountysc.gov/bsc

Business Permit Application

- This application is for businesses applying to operate at a single, annual event, not to exceed ten consecutive calendar days.

- An event is defined as participation by exhibitors or others where displays are established in individual booths or stalls to present goods or services offered for sale, rent or promotional purposes or for exhibitors' general goodwill.

- *Temporary Event Permits are required for organizers; applications are available at Zoning.*

Event Information

1. Type of Event: ❑ Antique show ❑ Carnival, fair, circus ❑ Craft show
   ❑ Food festival/competition ❑ Trade/business show
   ❑ Other (describe) _____

2. Name of Event: _____

3. Location of Event: _____

4. Length of Event: _____ days   Start Date: _____   End Date: _____

5. Type of merchandise to be sold (or service promoted): _____

6. Is this the first year of the event?   ❑ Yes ❑ No   If no, year of last event: _____

NOTE: Inspections and audits may be conducted during or after event to ensure compliance and accuracy.

Business Information

1. Corporate Business Name: _____

2. Name as seen by the public (if different): _____

3. Business Ownership: ❑ Corporation   ❑ LLC   ❑ LLP   ❑ LP   ❑ Individual

4. Date Business Started: _____

5. Work #: _____   Cell #: _____

6. 2017 NAICS Code   _____   (see http://www.census.gov/naics/ for assistance)

7. Physical Location: _____

8. <u>For new businesses</u> – Projected *gross* revenue for this event: $_____

   <u>For businesses getting first business license</u> – *gross* revenue from event last year: $_____

9. Are you   ❑ an exhibitor/vendor/performer   or   ❑ an organizer?

   If you are the event organizer, please answer the following questions:

   - estimated number of exhibitors/vendors/performers this year: _____

   - actual number of exhibitors/vendors/performers last year: _____

Efficiency   ·   Effectiveness   ·   Equity   ·   Integrity

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- actual revenues generated by event last year: $_____

- Names and full addresses of ALL exhibitors/vendors/performers must be provided before the event.

Owner/Principal Information

1. Owner/Principal(s) Name (no corporate names)_____

2. Federal ID # or SSN _____

3. *Complete* Home Address _____

4. Mailing Address_____

5. Work #: _____   Cell #: _____

6. E-mail:_____

7. Is this person responsible for the business license? ❑ Yes   ❑ No

8. If no, print the name, title and phone number of that person: Name: _____

   Title: _____   Phone: _____

Applicant Information

I certify by my signature below:

(a) That all information in this application is true and correct;

(b) that gross receipts are accurately reported;

(c) that all applicable licenses and permits are obtained, and

(d) that I understand this application is subject to being reviewed by all applicable departments to assess compliance with all the County's requirements applicable to this business.

Applicant Signature: _____   Printed Name: _____

Title: _____   Date: _____

OFFICE USE ONLY

Calculation of Fees: Both calculations must be completed. The greater fee amount is to be used.

❑ Permit fee x _____ # of *otherwise unlicensed* exhibitors/vendors/performers =

   $_____ total amount of Business Permit Fee due

❑ Total Revenues from last year of $ _____ / total number of exhibitors, etc. last year of _____ * total number of exhibitors this year = $_____ cost per exhibitor =

   $_____ total amount of Business Permit Fee due

BSC Staff Signature: _____   Date:_____

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