



Richland County Business Service Center

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<http://www.rcgov.us/bsc>

2012 Hospitality Tax Update Form

URGENT! Please complete and return by Monday, October 15, 2012.

Business Information

Business Corporate Name: _____

Name as seen by the public: _____

Hospitality Tax #: _____ Percent: _____ **2012** Frequency: _____

Business License #: _____ FEIN/ SSN: _____

State Retail Sales #: 040-_____ (This is a State Dept. of Revenue requirement.)

Physical Location: _____

Owner Information

Owner/Principal Name(s): _____

Work Phone: _____ Cell Phone: _____ Home Phone: _____

Owner/Corporate Mailing Address: _____

Owner/Corporate E-mail: _____

Contact Information (for person responsible for Hospitality Taxes)

Contact Name and title: _____

Mailing Address: _____

Work Phone: _____ Cell Phone: _____ Home Phone: _____

E-mail: _____

Please check all that apply:

- ** I only need to update the information for my business with the above information.
- I wish to receive paper vouchers instead of printing vouchers online at www.rcgov.us/bsc.
- My business has closed. Close date: _____
- My business has moved. New location: _____
- The ownership has changed. New owner name, address, phone #: _____

- I have _____ independent contractors.

**** Please return the Update Form even if there are no changes to be made. ****