



LICENSE #	
	Office Use Only

Town of Meggett, South Carolina

Business License Application for Non-Resident Contractors

Please Print Legibly All Applicable Information			
Business Name			
DBA			
Federal ID No Contractor License No			
Entity Type (check one): \square Sole Proprietor \square Partnership \square	Corporation \(\subseteq \text{LLC}		
Physical Business Address			
Mailing Address			
Business Activity Description			
Applicant Name			
Contact Phone Number Email			
Job Location/Site Address:			
Please state the TOTAL GROSS RECEIPTS of the job/contract: \$			
I would like to receive a payment invoice via: \Box Email \Box Mail Preferred Method of Payment: \Box Credit Card* \Box Check \Box Cash (In			
*Payments made via Credit Card will be subject to an additional 3.3% plus \$0.	30 processing fee.		
MAIL TO: Town of Meggett ATTN: Business Licensing 4776 Highway 165 Meggett, SC 29449 SCAN & EMAIL TO: clerk@townofmeggettsc.org Clerk@townofmeggettsc.org			
I certify that the above information is true and accurate.			
Signature of Applicant	Date		
Office Use Only	License Fee		
NAICS: Rate Class:	*Card Fee		
Method of Payment:	Penalty		
Approved By: Date:	TOTAL		