

216 South Catawba Street
Post Office Box 1149
Lancaster, South Carolina 29721-1149
Tel: 803-289-1462
Fax: 803-286-6110



Check One

- Annual Business License
- Event/Peddler Business License
- Project Only Business License

New Business License Pre-Approval and Application

If your business will be located in a new or existing building, DO NOT complete this form until the Zoning and Inspection Occupancy Permit (or Zoning Occupancy Permit) has been completed.

PLEASE PRINT CLEARLY! Complete this section and take to the Building, Planning, and Zoning Department. A staff member will review your proposed business for compliance with City of Lancaster Codes and Ordinances. To obtain a City business license, payment is due at time application is submitted. Businesses located outside the City limits need only report annual gross receipts generated within the City limits. Businesses located inside the City limits must report ALL annual gross receipts. City business licenses are issued annually for the period June 1 through May 31. **Renewal license fees are due and payable before June 1 or penalties are applied.** For businesses subject to Hospitality Tax, **payments are due by the 20th of each month or penalties are applied.**

Application Date: _____ Expected Start Date: _____ End Date (Project Only): _____

Applicant: _____

Applicant Telephone: _____ Applicant Cell Phone: _____

Applicant Business Name (DBA): _____

Project/Event Address: _____ **Lancaster, SC 29720**

Business Description: _____

Annual (Estimated) or Project Gross Receipts: \$ _____ Business Telephone: _____

Business Federal Identification Number/
Applicant Social Security Number: _____ South Carolina Business, Retail,
or Other Required License Number: _____

Business/Mailing Address: _____ City, ST Zip: _____

- Will the business have coin-operated machines? Yes No (If "Yes", additional fees apply)
- Will the business sell prepared foods and beverages? Yes No (If "Yes", Hospitality Tax applies)
- Will the business rent booths, e.g., beautician, barber, etc. Yes No (If "Yes", how many booths? _____)
- Will the business have on-site alcohol consumption? Yes No

Please provide two names with telephone numbers for Police or Fire Department personnel to contact in case of emergency:

Contact 1: _____ Telephone: _____

Contact 2: _____ Telephone: _____

I HEREBY CERTIFY THAT THE INFORMATION WRITTEN ABOVE IS TRUE AND CORRECT and that any and all business and business premises related assessments, charges, and taxes due to the City have been paid in full (§12-5 City of Lancaster Code of Ordinances). I understand that City ordinances provide for penalties and revocation of license for false or fraudulent statements.

Applicant Signature: _____ Date: _____

FOR INTERNAL USE ONLY Pre-Approval by Building, Planning, and Zoning Department
I have reviewed the proposed business and find that it complies with the applicable zoning requirements.
BPZ Staff: _____ Date: ____/____/____ Zoning: _____
Comments: _____

FOR INTERNAL USE ONLY Amount Due: \$ _____ Cash Check # _____ Paid: ____/____/____
 Business License Approved and Issued By: _____ License Number: _____ Expires: ____/____/____