

# 2025 OCCUPATIONAL TAX CERTIFICATE RETURN

Catoosa County

184 Tiger Trail

Ringgold, Georgia 30736

(706)965-4226 fax(706)965-4104

For Office Use Only

Customer Number \_\_\_\_\_

ID Number \_\_\_\_\_

## Section I – Please Answer Question 1-8

(1) Is Business Located in the County? ☐ Yes ☐ No

(2) Does this Business have an Occupational Tax Certificate in Another City/County in Georgia  
☐ Yes ☐ No Where? \_\_\_\_\_

(3) The Business Classification is ☐ Regular (i.e. Store) ☐ Professional (i.e. Doctor) ☐ Insurance Co. ☐ Bank

(4) Is this Business ☐ Permanent ☐ Seasonal ☐ Temporary

(5) State License? ☐ Yes ☐ No If yes License number \_\_\_\_\_

(6) Is This Business Newly Constructed? ☐ Yes ☐ No Date \_\_\_\_\_

(7) Has Business been Remodeled or Renovated? ☐ Yes ☐ No Date \_\_\_\_\_

(8) Is Business Out of Business? ☐ Yes ☐ No Date \_\_\_\_\_

(9) Everify Number?(only for businesses with more than 10 employees) \_\_\_\_\_

## Section II – Please Complete the Following Accordingly

Owner Name (Corporate Or Individual)		
D/B/A (Name of Business)		
Street Address (Local Address of business)		
Mailing Address <input type="checkbox"/> Same as Street Address		
City	State	Zip
Telephone	Fax	
Contact Person	Telephone	

## Section III – Check the Appropriate Category

CHECK THE TYPE OF BUSINESS TO BE CONDUCTED AT THIS LOCATION, IF BUSINESS TYPE IS NOT LISTED PLEASE LIST

- |                                      |   |                                       |   |
|--------------------------------------|---|---------------------------------------|---|
| <input type="checkbox"/> Apartment   | <input type="checkbox"/> Beauty/Barber Shop | <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Store/Merchant |
| <input type="checkbox"/> Auto Dealer | <input type="checkbox"/> Hotel/Motel        | <input type="checkbox"/> Restaurant   | <input type="checkbox"/> Taxi/Limousine |
| <input type="checkbox"/> Bank        | <input type="checkbox"/> Insurance          | <input type="checkbox"/> Service      | <input type="checkbox"/> Other _____    |

## Section IV – List the Number of Employees

Please list the Number of Employees Employed  
In the Business AS OF January 1, 2024

## Section V – Signature

**This Return Is Due on or Before the 1st of January of each year before a statement or certificate can be issued. Failure to file return by the 31<sup>st</sup> day of January will result in a \$25.00 penalty.** I certify that the foregoing information is true and correct. I understand that falsification of this return could cause denial of a certificate without refund. The undersigned certifies that he/she is the person duly authorized by the business herein named to file this registration and application.

Signature

Date

(OVER)