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|-----------|
| Acct. No. |
| |

| |
|-----------------|
| Expiration Date |
| |

PRIVILEGE LICENSE APPLICATION

THIS APPLICATION REQUIRED BY LAW
FORM MUST BE COMPLETED & ALL
QUESTIONS ANSWERED

| | |
|---------|-------------------|
| NAME | APPLICANT |
| ADDRESS | BUSINESS LOCATION |
| | TELEPHONE |

TYPE OF BUSINESS

| | | | |
|-----------------|---------------------|-------------------|------------------|
| WHOLESALE _____ | SELLING _____ | CORPORATION _____ | NAME OF |
| RETAIL _____ | MANUFACTURING _____ | PARTNERSHIP _____ | PARTNERS |
| SERVICE _____ | | INDIVIDUAL _____ | (IF PARTNERSHIP) |

WHEN WILL/DID YOU BEGIN OPERATION OF YOUR BUSINESS IN THE CITY
KIND OF BUSINESS (PLEASE BE SPECIFIC)

STATE SALES TAX ID NUMBER

LICENSE MUST BE RENEWED AND PAYMENT RECEIVED PRIOR TO EXPIRATION DATE TO AVOID PENALTY.

TOTAL NUMBER OF FULL-TIME EMPLOYEES FOR THE PAST TWELVE (12) MONTHS

(NOTE: The term "employee" means full-time employees and, with respect to a professional firm or clinic, also includes all partners; however, such term excludes seasonal employees. The term "full-time" means at least thirty (30) hours per seven day week.)

ENTER THE TOTAL HERE AND ON REVERSE SIDE IN BLOCK A.

WHOLESALE - RETAIL

- | | | |
|--|----|--|
| 1. AMOUNT OF ASSESSED INVENTORY (TO THE NEAREST DOLLAR;) (SEE SCHEDULE A ON REVERSE SIDE FOR AMOUNT OF FEE AS REQUIRED BY MISSISSIPPI STATUTE.) | 1. | |
| 2. IF YOU SELL BEER, COUNTY FEE IS \$30.00 | 2. | |
| 3. DO YOU HAVE GAME MACHINES? _____ IF SO, HOW MANY? _____ (\$45.00 EACH) | 3. | |
| 4. DO YOU HAVE VENDING MACHINES? _____ NUMBER AT \$10.00 EACH _____ NUMBER AT \$7.50 EACH _____ <small>(USE SCHEDULE D ON REVERSE SIDE)</small> | 4. | |
| 5. DO YOU HAVE KIDDY RIDES? _____ IF SO, HOW MANY? _____ (\$18.00 EACH) | 5. | |
| 6. DO YOU HAVE MUSIC MACHINES? _____ IF SO, HOW MANY? _____ (\$27.00 EACH) | 6. | |
| 7. DO YOU SELL FOOD? _____ IF SO, PLEASE ENCLOSE A COPY OF YOUR FOOD PERMIT. | | |

OTHER THAN WHOLESALE - RETAIL

- | | | |
|---|-----|--|
| 8. OTHER TYPE OF BUSINESS (EXCEPT MANUFACTURER'S) FEE (SEE SCHEDULE B ON REVERSE SIDE TO DETERMINE AMOUNT OF FEE.) | 8. | |
| 9. MANUFACTURER'S FEE (USE SCHEDULE C ON REVERSE SIDE TO DETERMINE AMOUNT OF FEE.) | 9. | |
| 10. TOTAL PRIVILEGE LICENSE FEE DUE (ADD BLOCKS 1 THRU 9) | 10. | |

AFFIDAVIT

I HEREBY CERTIFY THAT ALL INFORMATION GIVEN ON THIS APPLICATION FOR THE PURPOSE OF SECURING A PRIVILEGE LICENSE, AND DETERMINING THE AMOUNT DUE, IS TRUE AND CORRECT.

SIGNATURE _____ TITLE _____ DATE _____

APPLICATION MUST BE ACCOMPANIED BY REMITTANCE PAYABLE TO
FOR ADDITIONAL INFORMATION,

PHONE (601) 783 5511

PIKE COUNTY TAX COLLECTOR
PO BOX 111
MAGNOLIA, MS 39652

A. TOTAL NUMBER OF FULL-TIME EMPLOYEES

A.

SCHEDULE A - INVENTORY ASSESSMENT TABLE

IF YOU ARE A WHOLESALE OR RETAIL STORE DEALING IN THE SALE OF GOODS, WARES AND/OR MERCHANDISE:

ASSESSED VALUE IS DETERMINED AS IT APPEARS ON THE PERSONAL PROPERTY ASSESSMENT ROLLS. IF YOU ARE A NEW BUSINESS, ADD ESTIMATED ASSESSED VALUE INVENTORY IN NO. 1 ON FRONT PAGE OF APPLICATION, (ESTIMATED ASSESSED VALUE WILL BE 15% OF ESTIMATED TRUE VALUE).

Then, determine the amount of tax you owe by applying assessed value of your inventory to schedule listed below.

| <u>ASSESSED VALUE OF INVENTORY</u> | <u>PAY THIS AMOUNT</u> | <u>ASSESSED VALUE OF INVENTORY</u> | <u>PAY THIS AMOUNT</u> |
|------------------------------------|------------------------|------------------------------------|------------------------|
| \$0 - \$7,000 | \$20.00 | \$ 90,001 - \$100,000 | \$380.00 |
| \$7,001 - \$10,000 | \$25.00 | \$100,001 - \$125,000 | \$440.00 |
| \$10,001 - \$12,000 | \$32.50 | \$125,001 - \$150,000 | \$560.00 |
| \$12,001 - \$15,000 | \$40.00 | \$150,001 - \$175,000 | \$680.00 |
| \$15,001 - \$20,000 | \$50.00 | \$175,001 - \$200,000 | \$800.00 |
| \$20,001 - \$25,000 | \$62.50 | \$200,001 - \$225,000 | \$920.00 |
| \$25,001 - \$30,000 | \$75.00 | \$225,001 - \$250,000 | \$1,040.00 |
| \$30,001 - \$40,000 | \$92.50 | \$250,001 - \$300,000 | \$1,200.00 |
| \$40,001 - \$50,000 | \$150.00 | \$300,001 - \$350,000 | \$1,360.00 |
| \$50,001 - \$60,000 | \$200.00 | \$350,001 - \$400,000 | \$1,520.00 |
| \$60,001 - \$70,000 | \$250.00 | \$400,001 - \$450,000 | \$1,680.00 |
| \$70,001 - \$80,000 | \$300.00 | \$450,001 and over | \$1,840.00 |
| \$80,001 - \$90,000 | \$340.00 | | |

**SCHEDULE B - ALL BUSINESS
(OTHER THAN MANUFACTURERS & WHOLESALE/RETAIL STORES)**

| CODE | EMPLOYEES | FEE |
|------------|--------------------------------|--|
| 27-17-009 | 0 - 3 | \$20.00 |
| | 4 - 10 | \$30.00 |
| | OVER 10 | \$3.00 PER EMPLOYEE, NOT TO EXCEED \$150.00 |
| 27-17-035 | AUTO RENTAL | \$15.00 (CLASS 1) |
| | | \$10.00 (CLASS 2) |
| | | \$5.00 (CLASS 3 - CLASS 7) |
| 27-17-299A | PAWN BROKER | \$250.00 |
| 27-17-299B | ADDITIONAL TAX, DEADLY WEAPONS | \$250.00 |
| 27-17-392 | TRAVEL AGENCY | \$200.00 |
| 27-17-415 | WEAPONS, DEALERS IN DEADLY | \$100.00 |

SCHEDULE C - MANUFACTURERS

| EMPLOYEES | FEE |
|-----------|---------|
| 0 - 3 | \$20.00 |
| 4 - 10 | \$30.00 |
| OVER 10 | \$80.00 |

SCHEDULE D - VENDING MACHINES

- For each postage machine \$2.00
- For each cigarette machine \$2.50
- All other machines requiring the deposit of a coin of more than twenty cents (20¢) \$10.00 each
- All other machines requiring the deposit of a coin of ten cents (10¢) and not more than twenty cents (20¢) \$7.50 each

Please list each Vending Machine separately. (Attach additional sheet if needed).

Vending Machine Owner _____ Type of Machine* _____

Owner's Address _____

Responsible Party for Taxes _____ Item Cost ** _____

Vending Machine Owner _____ Type of Machine* _____

Owner's Address _____

Responsible Party for Taxes _____ Item Cost ** _____

Vending Machine Owner _____ Type of Machine* _____

Owner's Address _____

Responsible Party for Taxes _____ Item Cost ** _____

* Type of Vending Machines - Air; Vacuum; Car Wash; Drinks (Soft drinks, coffee, juice, etc.); Food (candy, chips, cookies, sandwiches, etc.); Gum Ball; Newspaper; Personal Items (shampoo, combs, brushes, soap, etc.); Cigarettes; Laundry Products; Postage; and Coin Changers.

** Item Cost - Cost of most expensive item in machine.