



## **Mobile Food Vendor Approval Packet**

To operate within the Town of Fort Mill, Mobile Food Vendors (commonly referred to as food trucks) are required to submit the attached Mobile Food Vendor Application to the Development Center for approval. Upon receipt of a completed submittal, Town staff will review the application and issue approvals by the Planning Department, Fire Marshal's Office, and Business License Official.

The following items are included in this Packet:

1. Mobile Food Vendor Application
2. Zoning Requirements for Mobile Food Vendors
3. Mobile Food Vehicle Fire Permit Application
4. Mobile Food Vehicle Inspection Checklist
5. Food Truck Safety Information
6. Town of Fort Mill Business License Application
7. Hospitality Tax Remittance Form

If you have any questions about the approval process, please contact the Development Center at (803)-835-2337 or [developmentcenter@fortmillsc.gov](mailto:developmentcenter@fortmillsc.gov). Staff recommends calling prior to submitting to ensure that applications are complete. **Please complete Fire Marshal inspection prior to submitting to Development Center to expedite process.**

**P.O. BOX 159 • 200 TOM HALL STREET • FORT MILL,  
SC 29715 TELEPHONE (803) 835-2337 • Email**

**[DEVELOPMENTCENTER@FORTMILLSC.GOV](mailto:DEVELOPMENTCENTER@FORTMILLSC.GOV)**

# Mobile Food Vendor Application

Town of Fort Mill, South Carolina

### Business / Applicant Information:

Name of Business: \_\_\_\_\_

Name(s) of Owner(s): \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Property Information:** Mobile food vendors are only permitted in commercial, mixed-use, or industrial zoning districts. Additional information may be required for public properties, rights-of-way, or special events.

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Current Use of Property: \_\_\_\_\_

### Mobile Food Vendor Vehicle Type:

Vehicle Make:

Model:

Year:

Tag Number:

**\*\*Note:** If you have additional food trucks that will be operated within the Town of Fort Mill, include the information above for each food truck.

APPLICATION CONTINUED ON NEXT PAGE

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## Submission Checklist

- Completed Application
- Business License Application OR copy of active Town Business License
- Fire Marshal Application OR copy of active Fire Marshal Approval
- List of all requested sites to include property owner(s), phone number, and physical address
- Attach the original copy of written permission for use of private property from the private property owner for each location.
- Attach a detailed map of each property's parking lot to include the intended area requested for the Mobile Food Vendor Vehicle(s) to be parked. (Zoning and Fire Marshal require information to review)
- Copy of permits required by the SC DHEC (South Carolina Depart. Of Health and Environmental Control)
- Application fee (\$35.00)

**Please Note: Additional materials may be required**



# Zoning Requirements for Mobile Food Vendors

## Article VI, Section 4 – Mobile Food Vendors

- A. *Purpose.* The Town Council hereby finds that the unrestricted sale or distribution of food and beverage from mobile food vendors, when not regulated, may pose a danger to health, safety, and general welfare. The purpose of this section is to regulate mobile food vendors in a manner that protects the public health, safety, and general welfare, while also accommodating entrepreneurial activity, as well as an active and social pedestrian environment within appropriate areas of the Town of Fort Mill.
- B. *Application Requirements.* It shall be unlawful for any person to engage in business as a mobile food vendor within the Town of Fort Mill without first obtaining approval by the Town. The Planning Director is authorized and shall establish an application form and submittal requirements for mobile food vendors. Each mobile food vendor shall submit an application for each location where the vendor intends to operate.
- C. *Operational Requirements.* Mobile food vendors may be permitted in any commercial, mixed-use, or industrial zoning district provided the following requirements are met for each location:
1. The approved mobile food vendor permit and DHEC inspection report shall be prominently displayed to the public in the food handling area of the vehicle during operation;
  2. Permits shall be issued and remain valid until the end of the calendar year in which the approval was granted. Permits shall then be renewed on an annual basis in accordance with the renewal schedule for business licenses for the Town;
  3. Written consent to operate on the property must be obtained from the private property owner(s) of the specific location and submitted with the permit application. As applicable, approval must also be obtained from any Home Owner's Association, Property Owner's Association, or similar entity with authority over the property;
  4. Approved hours of operation shall be between 8:00 a.m. and 9:00 p.m.; provided, on Friday and Saturday the hours may be extended to midnight;
  5. No alcoholic beverages shall be sold;
  6. Selling of non-food items from a mobile food vendor shall be prohibited with the exception of merchandise displaying the mobile food vendor logo and/or branding;
  7. Operations shall only occur on the property for which a permit was issued and shall not reduce the required parking area below the minimum requirement for any other use on the lot;
  8. No mobile food vendor shall operate within 200 feet from a customer entrance of a restaurant lawfully existing at the time the permit or renewal permit is issued. Provided, this distance requirement may be reduced to 100 feet if the applicant submits documentation signed by the restaurant owner certifying that the owner has no objection to the closer proximity;
  9. Operations shall not obstruct the visibility of motorists, interfere with parking lot circulation, block access to a public street, alley or sidewalk, or result in customer queuing that obstructs building entries or public walkways;
  10. Structures, canopies, seating, outdoor tables, grills and similar accessory facilities are prohibited;
  11. Only signs permanently affixed to or painted on the vehicle shall be permitted;
  12. Signs shall not project from the vehicle and shall not be illuminated;
  13. Mobile food vendors shall not produce any offensive or loud noise to attract customers or advertise products;
  14. Operators shall provide trash receptacles and be responsible for the storage and daily disposal of all trash, refuse, and litter;

15. Operators shall not cause any liquid wastes used in the operation to be discharged from the vehicle, with the exception of clean ice melt;
16. Operations, including the truck and customer queuing, shall be located at least 100 feet from any residential use in a residential zoning district;
17. Operations are prohibited on undeveloped property, lots with unoccupied structures, on unpaved surfaces, or within any right-of-way except as may be permitted for a special event.
18. No overnight stays shall be permitted: the unit cannot be left on site overnight.

D. *Public Property and Special Events.* Mobile food vendors requesting approval to operate on public property or as a part of a special event may be subject to additional applications, submittal requirements, and may be subject to additional and/or more restrictive requirements than those listed previously.



## **Mobile Food Vehicle Fire Permit Application**

If you have any questions regarding the Mobile Food Vehicle Fire Permit Application, please contact the Fire Marshal's Office at (803)-547-5511 or email [ewerner@fortmillsc.gov](mailto:ewerner@fortmillsc.gov)



TOWN OF FORT MILL  
FIRE MARSHAL'S OFFICE

**MOBILE FOOD VEHICLE FIRE PERMIT APPLICATION**

PERMIT NUMBER: \_\_\_\_\_

**Definition: Mobile Food Vehicle** - A motorized vehicle registered as a commercial vehicle and shall not be used for any purposes other than a Mobile Food Dispenser or Mobile Food Preparer business.

**NOTE: A Mobile Food Vehicle Fire Permit Application must be submitted and a Fire Inspection conducted by the Fort Mill Fire Department Fire Marshal's Office before submittal of a business license.**

**Inspections shall be scheduled by the Mobile Vendor with inspections conducted at the Fort Mill Fire Department, located at 121 Tom Hall Street. To schedule an inspection, contact the Fort Mill Fire Department at (803) 547-5511.**

**The following requirements must be met and documentation provided at time of Fire Inspection:**

- Mobile Food Vehicle Fire Permit Application filled out.
- Certificate of Liability Insurance for a minimum of \$1,000,000.00.
- Type II Hood and/or Fire Suppression Systems shall be inspected by a third-party inspection company, with documentation provided.
- A minimum of a 10-pound ABC (2A10BC) extinguisher that is mounted, accessible, and has been inspected per National Fire Protection Association (NFPA) 10. For grease cooking a Class K extinguisher that is mounted, accessible, and has been inspected per NFPA 10.
- Documentation showing all compressed gas cylinders have been inspected per the U.S. Department of Transportation, and meet the requirements of NFPA 58.

**Type of Permit:**  Annual  Temporary (Event) **Event:** \_\_\_\_\_

Mobile Vendor Business Name: \_\_\_\_\_

Mobile Vendor Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Mobile Vendor Responsible Party: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Type of Vehicle: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State: \_\_\_\_\_ Plate No.: \_\_\_\_\_

VIN:

LP-Gas:  Yes  No  1 – 40 Pound DOT Tank  2 – 20 Pound DOT Tank

Natural Gas:  Yes  No  1 – 40 Pound DOT Tank  2 – 20 Pound DOT Tank

Generator:  Yes  No  Gasoline  Diesel  LP

Location of Flammable Liquids During Operation: \_\_\_\_\_

Carbon Monoxide (CO) Detector Installed:  Yes  No

**NOTE: Failure to complete a Mobile Food Vehicle Permit and have required inspection conducted by the Fort Mill Fire Department Fire Marshal's Office may result in a citation of \$200.00.**

Fire Inspector Signature: \_\_\_\_\_  Approved  Disapproved Date: \_\_\_\_\_

Owner/Operator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Any questions, comments or concerns contact the Fort Mill Fire Department, Fire Marshal's Office at (803) 547-5511.



**TOWN OF FORT MILL  
FIRE MARSHAL'S OFFICE**

**MOBILE FOOD VEHICLE INSPECTION CHECKLIST**

Permit No.: \_\_\_\_\_  
Date: \_\_\_\_\_ Time of Inspection: \_\_\_\_\_  
Location of Inspection: **Fort Mill Fire Department, Station 1, 121 Tom Hall Street, Fort Mill, SC 29715**  
Vehicle Representative: \_\_\_\_\_  
Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_  
License Plate No.: \_\_\_\_\_

**FIRE EXTINGUISHERS:**

2A10BC     3A40BC     Inspected per NFPA 10     Mounted     Accessible  
 Class K Extinguisher     Inspected per NFPA 10     Mounted     Accessible

**LPG (Propane):**

L.P. Gas containers shall be located and secured on the exterior of vehicle.  
*Not to be located on roof, inside passenger compartment, or extend further than the rear bumper and shall be protected from vehicle collision.*  
 "NO SMOKING" sign posted with a minimum of 4-inch lettering above propane bottle.  
 Hose used to pipe L.P. Gas must be Underwriter Laboratories (UL) or FM listed (marked 350 psi working pressure)  
 Couplings, fittings, and other deices meet UL or FM requirements.  
 LPG tanks are to be located outside the vehicle with a minimum 5 feet from primary means of egress.

**TYPE II HOOD / FIRE SUPPRESSION SYSTEM:**

Type II Hood cleaned with record of cleaning verified.  
 Fire Suppression System serviced with record of service verified.

**GENERATOR:**

Refueling of generators to be performed in an approved location not less than 20 feet from vehicle.  
 Fuel to be stored away from vehicle, no less than 20 feet, or in approved flammable liquid safety container.  
 Storage is in an approved location (secured from movement).  
 Generators shall be grounded in an approved method.  
 Generators shall not be refueled in areas occupied by the public.  
 Generators shall be caged or fenced off to prevent public access in approved manner.  
 A minimum 2A10BC extinguisher shall be located a minimum of 20 feet from generator while refueling.

**GENERAL FIRE SAFETY:**

Installation of electrical equipment shall comply with the Electrical Codes NFPA 70 and NEC.  
 Aisle-way on interior of vehicle kept clear of storage and combustibile materials.  
 Exit door latch mechanism(s) shall be operable by hand.

Approved     Disapproved    If Approved Permit Sticker Number: \_\_\_\_\_

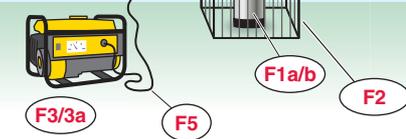
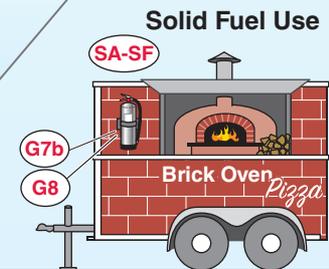
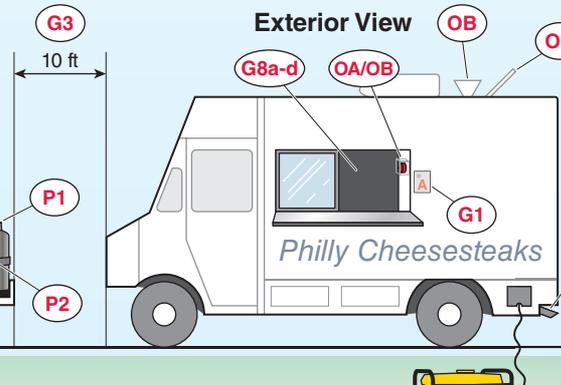
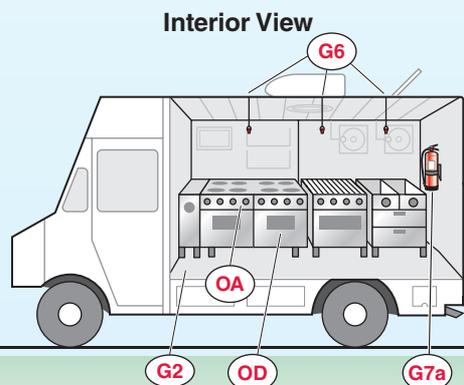
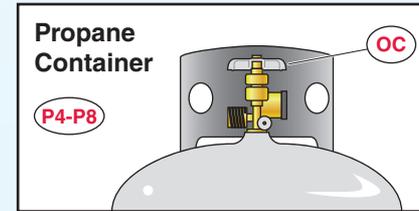
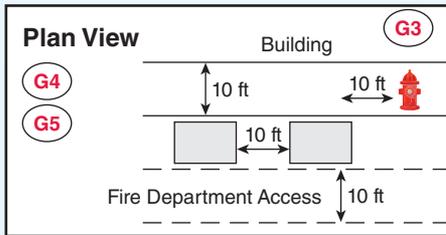
Inspected by: \_\_\_\_\_ Date: \_\_\_\_\_

Re-Inspection Re-Scheduled for Date: \_\_\_\_\_





# FACT SHEET » Food Truck Safety



## NATIONAL FIRE PROTECTION ASSOCIATION

The leading information and knowledge resource on fire, electrical and related hazards

NOTE: This information is provided to help advance safety of mobile and temporary cooking operations. It is not intended to be a comprehensive list of requirements for mobile and temporary cooking operations. Check with the local jurisdiction for specific requirements. This safety sheet does not represent the official position of the NFPA or its Technical Committees. The NFPA disclaims liability for any personal injury, property, or other damages of any nature whatsoever resulting from the use of this information. For more information, go to [nfpa.org/foodtrucksafety](http://nfpa.org/foodtrucksafety).

# FACT SHEET » Food Truck Safety (continued)

NFPA code references are provided at the end of each item. The red keys correspond to the NFPA food truck safety diagram. For more detailed information, see Annex B in NFPA 96.

## GENERAL SAFETY CHECKLIST

- Obtain license or permits from the local authorities. [1:12.8(a)] **G1**
- Ensure there is no public seating within the mobile food truck. **G2**
- Check that there is a clearance of at least 10 ft away from buildings, structures, vehicles, and any combustible materials. [96:7.8.2; 96:7.8.3 for carnivals only] **G3**
- Verify fire department vehicular access is provided for fire lanes and access roads. [1:18.2.4] **G4**
- Ensure clearance is provided for the fire department to access fire hydrants and access fire department connections. [1:13.1.3; 1:13.1.4; 1:13.1.5] **G5**
- Check that appliances using combustible media are protected by an approved fire extinguishing system. [96:10.1.2] **G6**
- Verify portable fire extinguishers have been selected and installed in kitchen cooking areas in accordance with NFPA 10. [96:10.9.3] **G7a**
- Where solid fuel cooking appliance produce grease-laden vapors, make sure the appliances are protected by listed fire-extinguishing equipment. [96:14.7.1] **G7b**
- Ensure that workers are trained in the following: [96:B.15.1]: **G8**
  - Proper use of portable fire extinguishers and extinguishing systems [10:1.2] **G8a**
  - Proper method of shutting off fuel sources [96:10.4.1] **G8b**
  - Proper procedure for notifying the local fire department [1:10.14.9 for carnivals only] **G8c**
  - Proper procedure for how to perform simple leak test on gas connections [58:6.16, 58:6.17] **G8d**

## FUEL & POWER SOURCES CHECKLIST

- Verify that fuel tanks are filled to the capacity needed for uninterrupted operation during normal operating hours. [1:10.14.10.1 for carnivals only] **F1a**
- Ensure that refueling is conducted only during non-operating hours. [96:B.18.3] **F1b**
- Check that any engine-driven source of power is separated from the public by barriers, such as physical guards, fencing, or enclosures. [96:B.16.2.2] **F2**
- Ensure that any engine-driven source of power is shut down prior to refueling from a portable container. [1:11.7.2.1.2] **F3**
- Check that surfaces of engine-driven source of power are cool to the touch prior to refueling from a portable container. **F3a**
- Make sure that exhaust from engine-driven source of power complies with the following: **F4**
  - At least 10 ft in all directions from openings and air intakes [96:B.13] **F4a**
  - At least 10 ft from every means of egress [96:B.13] **F4b**
  - Directed away from all buildings [1:11.7.2.2] **F4c**
  - Directed away from all other cooking vehicles and operations [1:11.7.2.2] **F4d**
- Ensure that all electrical appliances, fixtures, equipment, and wiring complies with the NFPA 70®. [96:B.18] **F5**

## PROPANE SYSTEM INTEGRITY CHECKLIST

- Check that the main shutoff valve on all gas containers is readily accessible. [58:6.26.4.1(3)] **P1**
- Ensure that portable gas containers are in the upright position and secured to prevent tipping over. [58:6.26.3.4] **P2**
- Inspect gas systems prior to each use. [96:B.19.2.3] **P3**
- Perform leak testing on all new gas connections of the gas system. [58:6.16; 58:6.17] **P4**
- Perform leak testing on all gas connections affected by replacement of an exchangeable container. [58:6.16; 58:6.17] **P5**
- Document leak testing and make documentation available for review by the authorized official. [58:6.26.5.1(M)] **P6**
- Ensure that on gas system piping, a flexible connector is installed between the regulator outlet and the fixed piping system. [58:6.26.5.1(B)] **P7**
- Where a gas detection system is installed, ensure that it has been tested in accordance with the manufacturer's instructions. [96:B.19.2.1] **P8**

## OPERATIONAL SAFETY CHECKLIST

- Do not leave cooking equipment unattended while it is still hot. (This is the leading cause of home structure fires and home fire injuries.) **OA**
- Operate cooking equipment only when all windows, service hatches, and ventilation sources are fully opened. [96:14.2.2; 96:14.2.3] **OB**
- Close gas supply piping valves and gas container valves when equipment is not in use. [58:6.26.8.3] **OC**
- Keep cooking equipment, including the cooking ventilation system, clean by regularly removing grease. [96:11.4] **OD**

## SOLID FUEL SAFETY CHECKLIST (WHERE WOOD, CHARCOAL, OR OTHER SOLID FUEL IS USED)

- Fuel is not stored above any heat-producing appliance or vent. [96:14.9.2.2] **SA**
- Fuel is not stored closer than 3 ft to any cooking appliance. [96:14.9.2.2] **SB**
- Fuel is not stored near any combustible flammable liquids, ignition sources, chemicals, and food supplies and packaged goods. [96:14.9.2.7] **SC**
- Fuel is not stored in the path of the ash removal or near removed ashes. [96:14.9.2.4] **SD**
- Ash, cinders, and other fire debris should be removed from the firebox at regular intervals and at least once a day. [96:14.9.3.6.1] **SE**
- Removed ashes, cinders, and other removed fire debris should be placed in a closed, metal container located at least 3 ft from any cooking appliance. [96:14.9.3.8] **SF**

## NFPA RESOURCES

NFPA 1, *Fire Code*, 2015 Edition  
NFPA 1 *Fire Code Handbook*, 2015 Edition  
NFPA 58, *Liquefied Petroleum Gas Code*, 2017 Edition  
*LP-Gas Code Handbook*, 2017 Edition  
NFPA 70®, *National Electrical Code*®, 2017 Edition  
*National Electrical Code*® *Handbook*, 2017 Edition

NFPA 96, *Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations*, 2017 Edition  
NFPA 96: *Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations Handbook*, 2017 Edition

For more of these resources,  
**become an NFPA member**

# ATTENTION.

## Food Truck Operators

### Are you aware that your compressed gas cylinders must be inspected?

Cylinders are required to be requalified, or replaced every 5-12 years depending on the cylinder type, condition, and previous requalification method (Ref. 49 CFR §§ 180.205(d) and 180.209).

The original manufacture/test date and any requalification/retest dates must be presented in a specific manner. Cylinders that are overdue for requalification must not be refilled.

If propane tanks are manufactured to ASTM Standards and built into the truck's body making it difficult to remove, then these tanks are exempt from the DOT reinspection requirements.

For more information, contact the Hazmat Info-Center: 1-800-467-4922.



RIN number identifying retester/requalifier

7<sup>A1</sup><sub>32</sub> 14

Month last requalified    Year last requalified

Requalification Date



#### Original Manufacture/ Test Date

If no requalification markings are found, the cylinder must be requalified within 12 years of the original manufacture date. (Must be requalified by 5/2017 in this example)

#### Volumetric Test.

Basic Marking. Must be requalified within 12 years of stamped date (Must be requalified by 7/2026 in this example)

#### Proof Pressure Test.

“S” indicates cylinder must be requalified within 7 years of stamped date (Must be requalified by 7/2021 in this example)

#### External Visual Test.

“E” indicates cylinder must be requalified within 5 years of stamped date (Must be requalified by 7/2019 in this example)



U.S. Department of Transportation

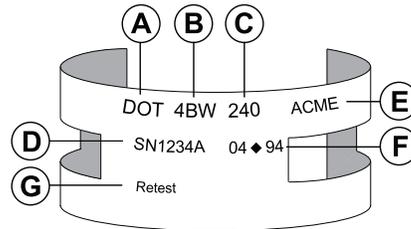
Pipeline and Hazardous Materials Safety Administration

If cylinder is out of test find an approved requalifier to requalify your cylinder. A list of DOT approved requalifiers is available from the PHMSA website:

<https://portal.phmsa.dot.gov/rinlocator>

# Requalification Guidance for Propane Cylinders

Propane cylinders have identifying marks on the cylinder neckring (collar), or cylinder shoulder depending on the cylinder type. The diagram below depicts examples of several of the required markings.



- Ⓐ Manufactured to U.S. DOT specifications
  - Ⓑ Cylinder specification type (e.g. 4B, 4BA, 4BW, and 4E)
  - Ⓒ Cylinder service pressure (psig)
  - Ⓓ Cylinder serial number
  - Ⓔ Manufacturer's name (or registered symbol)
  - Ⓕ Original manufacture/test date, month and year, and inspector's mark, as required (i.e., this diagram indicates April 1994 and inspector's mark ♦)
  - Ⓖ Area for date requalified/retested (no date is shown indicating that the 12-year requalification is *overdue*)
- \* Additional markings may be present as authorized by HMR under the specification

## Requalification/Retesting (49 CFR § 180.205)

The "requalification" date, also known as the "retest" date (Ⓖ), is an important marking for fillers and/or consumers.

Propane cylinders must be requalified or replaced every 5-12 years depending on the cylinder type, condition, and previous requalification method. (Ref. 49 CFR § 180.205(d) and 180.209.)

The original manufacture/test date (Ⓕ) and any requalification/ retest date(s) (Ⓖ) must be presented in a specific manner, reviewed, and determined to be within test prior to filling.

## Visual Cylinder Inspection

In accordance with 49 CFR § 173.301(a)(2), cylinders must undergo a visual inspection prior to being filled. If any of the defects noted in items 1 through 4 below are present, the cylinder **must not be filled** and may only be repaired, requalified, or rebuilt by an authorized U.S. DOT facility (see authorized RIN and VIN holders below):

1. Damage to the cylinder's exterior including dents; bulges; cuts; or cracks on the cylinder's surface, or to welds; and any evidence of physical abuse; fire; or heat damage.
2. Detrimental rust, corrosion, or pitting on the cylinder, particularly on the bottom.
3. Absence of/damage to a cylinder footring, cylinder neckring (collar), or valve cover.
4. A leaking or defective valve or leaking or defective pressure relief device.

A cylinder conforming to the Visual Inspection criteria also must be examined for the most recent repair, requalification, or rebuild date prior to filling. Cylinders that are overdue for requalification must **NOT** be refilled.

- DOT 4-series propane cylinders must be requalified **12 years** following their manufacture date and every **5, 7, or 12 years** thereafter depending on how the last requalification, if any, was completed.
  - » If no requalification date is present, 12-years from the date of manufacture.
  - » If requalification was completed by the "**Volumetric Expansion**" method, as indicated by a valid RIN holder's requalification mark, 12-years after that date.
  - » If requalification was completed by the "**Proof-Pressure**" method, as indicated by a valid RIN holder's requalification mark followed by an "**S**" 7-years after that date.
  - » If requalification was completed by the "**External Visual**" method, as indicated by a valid RIN or VIN holder's requalification mark followed by an "**E**" 5-years after that date.

## Sample Requalification Marks (49 CFR § 180.213)

01 **A** 1 07  
3 2

An approved **RIN** holder's marking "A123" certifying a 12-year Volumetric Expansion test conducted in January 2007

01 **A** 1 07 "X"  
3 2

The same **RIN** holder's marking where "X" represents the symbol of the testing method used for requalification:  
"E": 5-Year External Visual Method  
"S": 7-Year Proof-Pressure Method

V123456 0107 E

An External Visual marking for an approved **VIN** holder denoting the 5-Year External Visual method conducted in January 2007 (Ref. VIN Approval Letter)

**NOTE!** Requalification Marks may only be applied by valid U.S. DOT RIN (Requalifier Identification Number) or VIN (Visual Identification Number) holders!

Authorized RIN and VIN holders are listed: <http://phmsa.dot.gov/hazmat/regs/sp-a/approvals/cylinders>



## **Town of Fort Mill Business License Application**

If you have any questions regarding the Town of Fort Mill Business Application, please contact the Business License Official at (803)-547-2116



# TOWN OF FORT MILL

200 TOM HALL STREET  
PO BOX 159  
FORT MILL, SC 29716-0159  
PHONE: 803-547-2034

APPLICATION FOR PRIVILEGE LICENSE FOR CALENDAR YEAR 2021

**(MAKE SEPARATE APPLICATION FOR EACH BUSINESS TO BE LICENSED AT EACH LOCATION)**

ALL BUSINESSES ARE SUBJECT TO AUDIT AND VERIFICATION OF GROSS RECEIPTS BY EXAMINATION OF INCOME TAX RETURNS AND DOCUMENTS FILED WITH STATE AND FEDERAL GOVERNMENT AGENCIES.

NAME OF APPLICANT (INDIVIDUAL OR FIRM)/MAILING ADDRESS:

FINANCIAL INFORMATION WILL REMAIN CONFIDENTIAL

NAME: \_\_\_\_\_

ADDRESS LINE 1: \_\_\_\_\_

ADDRESS LINE 2: \_\_\_\_\_

CITY/ST/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

DATE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

ACCOUNT NO.: \_\_\_\_\_

BUSINESS CLASS: \_\_\_\_\_

TAX ID NUMBER: \_\_\_\_\_

BUSINESS DESC: \_\_\_\_\_

OWNERSHIP TYPE: \_\_\_\_\_

STATE LICENSE #: \_\_\_\_\_

PERSON RESPONSIBLE: \_\_\_\_\_

**THE REQUIRED LICENSE FEE IS DUE AND PAYABLE 03/01/2020.**

THIS IS APPLICATION FOR:

**FOR RENEWAL**, THE LICENSE FEE SHALL BE COMPUTED ON GROSS INCOME FOR THE PRECEEDING CALENDAR YEAR.

- 1.  NEW BUSINESS
- 2.  RENEWAL OF LICENSE
- 3.  CHANGE OF OWNERSHIP
- 4.  CHANGE OF LOCATION

**FOR A NEW BUSINESS**, THE LICENSE FEE SHALL BE COMPUTED ON ESTIMATED PROBABLE GROSS INCOME FOR THE BALANCE OF THE LICENSE YEAR. **MUST PROVIDE A REALISTIC ESTIMATE**

- 1.  CORPORATION
- 2.  PARTNERSHIP
- 3.  INDIVIDUAL OWNERSHIP

**PENALTIES:** FOR NON-PAYMENT OF ALL OR ANY PART OF THE CORRECT LICENSE FEE, A 5% LATE PENALTY SHALL BE ASSESSED FOR EACH MONTH OR PORTION THEREOF UNTIL PAID.

**\*LICENSE FEES UNPAID AFTER 60 DAYS ARE SUBJECT TO LEGAL ACTION**

**CALCULATION OF LICENSE FEE:**

GROSS RECEIPTS \$ \_\_\_\_\_

*FOR FEE CALCULATION PLEASE*

*EMAIL: [businesslicense@fortmillsc.gov](mailto:businesslicense@fortmillsc.gov)*

*PLEASE MAKE A COPY FOR YOUR RECORDS, AND PROMPTLY RETURN APPLICATION WITH PAYMENT SO LICENSE CAN BE ISSUED. IF NOT RENEWING, PLEASE NOTIFY TO AVOID PENALTIES.*

**OFFICE USE ONLY:**

DATE ISSUED: \_\_\_\_\_

LICENSE FEE: \_\_\_\_\_

PENALTY: \_\_\_\_\_

TOTAL: \_\_\_\_\_

CODE: \_\_\_\_\_

RESIDENT: \_\_\_\_\_

I (WE) DO HEREBY CERTIFY THAT THE AMOUNT AS TOTAL GROSS FROM MY BUSINESS OR PROFESSION AS REPORTED HEREIN IS TRUE AND CORRECT, AND THAT I AM FAMILIAR WITH THE TOWN ORDINANCE PROVIDED FOR PENALTIES AND REVOCATION OF MY LICENSE FOR MAKING FALSE OR FRAUDULENT STATEMENTS IN THIS APPLICATION. I (WE) DO HEREBY CERTIFY THAT ALL PERSONAL PROPERTY TAXES HAVE BEEN PAID WHICH ARE DUE AND PAYABLE TO THE TOWN OF FORT MILL AS OF THIS DATE IF APPLICABLE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date



## **Hospitality Tax Remittance Form**

The 2% hospitality tax is to be remitted to the Town on a monthly basis, along with the attached form, and is due by the 20th day of the month and should cover the tax due for the previous month. (Businesses collecting less than \$50 per month may report quarterly)

Any tax not remitted by the 20th day of the month is subject to a 5% penalty. Please send your check made payable to the Town of Fort Mill to: Hospitality Tax, Town of Fort Mill, P.O. Box 159, Fort Mill, South Carolina, 29716. Please include the correct month's form and include it with your monthly remittance.



TOWN OF FORT MILL  
112 CONFEDERATE STREET  
PO BOX 159  
FORT MILL, SC 29716-0159  
PHONE: 803-547-2034 FAX: 803-548-4722

## LOCAL HOSPITALITY TAX

The 2% hospitality tax is to be remitted to the Town on a monthly basis, along with this form, and is due by the 20th day of the month and should cover the tax due for the previous month.

Any tax not remitted by the 20th day of the month is subject to a 5% penalty per month (or fraction of a month) until tax is paid.

*Reporting Period* \_\_\_\_\_

Business Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Signature \_\_\_\_\_

*Checks payable to: Town of Fort Mill, PO Box 159, Fort Mill, SC 29716*

Gross Proceeds  
From the Sale of  
Prepared Food and  
Beverages

\$ \_\_\_\_\_

Total Due:  
(Total equals gross x 2%)

\$ \_\_\_\_\_

*This coupon must accompany payment. If you are reporting no activity for the month, the coupon must be sent on or before the 20<sup>th</sup> of the month showing "0" activity.*