

402 Lee Street NE
Decatur, AL 35602
revenueforms@decatur-al.gov

City of Decatur Alabama



License I.D. # _____

ORGANIZATION TYPE:

- CORPORATION
- LLC
- PARTNERSHIP
- SOLE PROPRIETOR

Application Type: _____ New _____ Tax Account _____ Location Change _____ Name Change

Business Type: Retail Wholesale Contractor Service Professional Manufacturer
 Rental Other

Business

Name: _____ DBA _____

Physical

Address: _____

Mailing

Address: _____

Telephone: _____ E-mail: _____

Owner(s)/Officer(s): _____

Name: _____ Title: _____ Phone _____

Name: _____ Title: _____ Phone _____

Number of Employees: _____ Business Start Date _____

State of Alabama ID# _____ FEIN# _____

NAICS# _____ Name of Person Completing Application _____

If this is a Rental/Leasing License is it: Residential _____ or Commercial _____? *Place an X in the appropriate box.*

Will this be a home based Business? _____ If yes, is it located in the City of Decatur? _____ If so, you will need to go to the 4th floor Building Dept. and complete a zoning form before you can be issued a business license.

Does this business license require you pay Taxes? If yes what tax account will you need to be set up for?

Sales Tax _____ Rental Tax _____ Lodging tax _____ Consumers Tax _____ Tobacco Tax _____

Liquor Tax _____ Sellers Use Tax _____ Beer Tax _____ Wine Tax _____ Gas Tax _____

What is the Start Date of your Tax? _____

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If you need help with the calculations contact the Revenue Department (256) 341-4546 or
businesslicense@decatur-al.gov

LICENSE COMPUTATION AREA

NAICS#	Business Description	Total Revenue Made	License Amount	Department Use
				\$
				\$
				\$
				\$
	TOTAL LICENSE AMOUNT	→		\$
	PENALTY	%		\$
	ISSUE FEE	→	14.00	\$
	TOTAL AMOUNT DUE	→		\$

Will you or any tenant be using any portion of this building for civic, social, worship, recreation or amusement (arcade or gaming machines) that is secondary to the use shown on your business license? _____

I certify that I have read and understand this application and provided truthful information. All laws and ordinances will be upheld at this business. I understand that a business license may be revoked if any information is incorrect and/or if any laws are ordinances are violated.

This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above named entity, and person(s).

Date _____ Signature _____

Title _____

Please return a copy of this form, along with payment to the City of Decatur, to the mailing address listed above. Upon receipt of this form, compliance with any other applicable licensing prerequisites, and payment, you will be assigned a license number. A printed license and any necessary tax reports for you to use in filing applicable taxes will be sent to the mailing address you are providing with this form.

If you have any questions concerning the completion of this form, please send us an email to
businesslicense@decatur-al.gov

CITY OF DECATUR BUSINESS LICENSE RATES

RETAIL MERCHANT / SERVICE/ RESTAURANT SCHEDULE RATES

Less than	10,000.....	\$75.00
\$10,000 or more, but less than.....	20,000.....	\$100.00
\$20,000 or more, but less than.....	30,000.....	\$125.00
\$30,000 or more, but less than.....	40,000.....	\$150.00
\$40,000 or more, but less than.....	50,000.....	\$175.00
\$50,000 or more, but less than.....	60,000.....	\$200.00
\$60,000 or more, but less than.....	70,000.....	\$225.00
\$70,000 or more, but less than.....	80,000.....	\$250.00
\$80,000 or more, but less than.....	90,000.....	\$275.00
\$90,000 or more, but less than.....	100,000.....	\$300.00

City of Decatur
Alabama

Plus 1/10th of 1% (.001) of all gross receipts in excess of \$100,000

WHOLESALE MERCHANT SCHEDULE RATE		
Less than	40,000.....	\$100.00
\$40,000 or more, but less than.....	60,000.....	\$125.00
\$60,000 or more, but less than.....	80,000.....	\$150.00
\$80,000 or more, but less than.....	100,000.....	\$175.00
\$100,000 or more, but less than.....	120,000.....	\$200.00
\$120,000 or more, but less than.....	140,000.....	\$225.00
\$140,000 or more, but less than.....	160,000.....	\$250.00
\$160,000 or more, but less than.....	180,000.....	\$275.00
\$180,000 or more, but less than.....	200,000.....	\$300.00

Plus 1/20th of 1% (.0005) of all gross receipts in excess of \$200,000

PROFESSION/VOCATION SCHEDULE RATES		
Less than	10,000.....	\$75.00
\$10,000 or more, but less than.....	20,000.....	\$150.00
\$20,000 or more, but less than.....	40,000.....	\$200.00
\$40,000 or more, but less than.....	60,000.....	\$250.00
\$60,000 or more, but less than.....	80,000.....	\$300.00
\$80,000 or more, but less than.....	100,000.....	\$350.00

Plus 1/5th of 1% (.002) of all gross receipts in excess of \$100,000

RENTAL/LEASING SCHEDULE RATES		
Less than	10,000.....	\$75.00
\$10,000 or more, but less than.....	20,000.....	\$125.00
\$20,000 or more, but less than.....	40,000.....	\$175.00
\$40,000 or more, but less than.....	60,000.....	\$225.00
\$60,000 or more, but less than.....	80,000.....	\$275.00
\$80,000 or more, but less than.....	100,000.....	\$300.00

Plus 1/20th of 1% (.0005) of all gross receipts in excess of \$100,000

CONTRACTOR RATES		
Less than	20,000.....	\$75.00
\$20,000 or more, but less than.....	50,000.....	\$150.00
\$50,000 or more, but less than.....	100,000.....	\$250.00
\$100,000 or more, but less than.....	300,000.....	\$350.00
\$300,000 or more, but less than.....	500,000.....	\$450.00
\$500,000 and over.....		\$500.00

Plus 1/20th of 1% (.0005) of all gross receipts in excess of \$500,000

-PLEASE NOTE THE \$14.00 ISSUING FEE FOR ALL LICENSES-