



APPLICATION FOR TEMPORARY BUSINESS LICENSE

Please complete this form and submit it by mail or in person along with your Check, Money Order or Cashier's Check in the amount of \$25 made out to the City of Camden.

Mail to: City of Camden, PO Box 7002, Camden, SC 29021
In person: City of Camden, 1000 Lyttleton Street, Camden, SC, 29020.

BUSINESS NAME _____
MAILING ADDRESS _____ CITY _____ ST _____ ZIP _____
OWNER/OFFICER _____ FEDERAL ID NO _____
BUSINESS PHONE _____ EMERGENCY PHONE _____
SOCIAL SECURITY NO _____ SC SALES TAX NO _____
ACCOUNT/BOOKKEEPER (IF APPLICABLE) _____

COMPUTATION OF REVENUE FOR BUSINESS LICENSE FEE

Total Fee Due: \$25.00

EVENT DATE(S): 9/24/22

EVENT LOCATION: Camden City Arena

EVENT NAME: Fire Fest 2022

BY SIGNING BELOW, THE APPLICANT CERTIFIES THAT THE ABOVE INFORMATION IS ACCURATE, THAT ALL REQUIRED PERMITS AND FEES HAVE BEEN PAID, AND THAT ALL PROPERTY TAXES DUE AND PAYABLE TO THE CITY OF CAMDEN HAVE BEEN PAID.

SIGNATURE

TITLE

DATE