



OPENING A BUSINESS IN TUCKER?

- 1) Make sure you have zoning approval for your business use before you sign a lease or buy a property.
- 2) Obtain a building permit if you plan to do any exterior or interior construction. Please provide a copy of your *Certificate of Occupancy* or *Certificate of Completion* with your business license application.
- 3) Obtain a trade permit if you need to do electrical, mechanical, or plumbing work.
- 4) Review the *New Business Checklist* (tuckerga.gov/checklist) regarding what is required to submit with your business license application.
- 5) All businesses are required to obtain a city business license.
- 6) If you would like signs on your property, including signs painted on a building, you will need to apply for a sign permit.



**For more information, please contact Building & Permitting or Business Licensing:
TUCKER CITY HALL**

1975 Lakeside Parkway, Suite 350
Tucker, GA 30084
(678) 597-9040

Please note that the City of Tucker relies on DeKalb County for services such as water and sewer, fire, and addressing. Building permits and business licenses need to be reviewed by DeKalb County for compliance with their regulations and systems.

DeKalb Watershed Management is under a Federal Consent decree and therefore, their review times for water, sewer, and FOG often take longer than most other departments.

TUCKERGA.GOV

NEW HOME-BASED BUSINESS CHECKLIST

FREE NOTARY SERVICES PROVIDED AT CITY HALL

Applicant must apply in person

- Proof of Residency – Must be one of the following:
 - Signed Lease
 - Property/Warranty Deed
 - Utility Bill (Gas, Light, or Water)
 - ** If applicant is not homeowner, provide a notarized letter from homeowner, or leasing office, confirming residence and granting permission to operate in the home. Must also provide one of the documents listed above with a copy of the homeowner's valid ID on letterhead for multifamily dwellings.*
- A valid picture identification that is not expired
 - Driver's license
 - State issued identification
 - Passport

Home occupation Applicant's Driver's License must reflect City of Tucker Address
- Home Occupation Supplemental Registration Form
- Articles of Incorporation
- Zoning Confirmation received from Zoning Department
- SAVE Affidavit Verifying Lawful Presence (Notarized)*
- Private Employer Affidavit of Compliance – E-Verify (Notarized)*
Provide (6) six-digit E-Verify Number for 10 or more Employees
- Permanent Resident "Green" Card – (Non-U.S. Citizens Only)
Please Copy Both Sides of Card!
- Federal Identification Number OR Social Security Number
- Copy of Professional State License (If applicant's business is a profession requiring state license)

****Please note that if a home occupational business changes to a commercial location, a new application will need to be completed.**

Occupational Tax Certificates expire each year on December 31st and must be renewed annually.



1975 Lakeside Pkwy, Ste 350
 Tucker, GA 30084
 678-597-9040
 www.tuckerga.gov
 licenses@tuckerga.gov

Temp ID#:

INSTRUCTIONS: Please complete all sections of this form. Return complete application along with all required document to the Finance Department.

The State of Georgia requires a notarized SAVE and E-Verify to issue a valid business license.

All business licenses expire annually on December 31st. Business licenses must be renewed annually, on or before April 15th.

Business Tax Account Information

APPLICATION TYPE: NEW BUSINESS CHANGE OF ADDRESS CHANGE OF OWNERSHIP NAME CHANGE

1. Legal Name of Business		2. Trade Name (DBA)	
3. Business Location Address			3a. Space is: <input type="checkbox"/> Owned <input type="checkbox"/> Leased <input type="checkbox"/> Subleased/Shared
4. Mailing Address			5. Business Phone
5a. Business Website			5b. Type of Business <input type="checkbox"/> Home-Based <input type="checkbox"/> Commercial
6. On-site Contact (if other than owner)		6b. Phone	6c. E-mail
7. Owner Name		7a. Owner Phone	7b. Owner E-mail
8. Type of Business: <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Sole Owner <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit <input type="checkbox"/> Other (please specify):		9. Six-digit NAICS # www.naics.com	10. FOR OFFICE USE Tax Class _____ Rate _____
11. Square footage of the building or suite?	11a. MOVE IN: <input type="checkbox"/> AS IS <input type="checkbox"/> with ALTERATIONS	12. Sanitation Location #	13. Business start date in City of Tucker:
14. Federal Employer ID# (FEIN)	<small>The Federal Employee Identification Number is required for business entity types except for Sole Proprietors. Assigned the Internal Revenue Service at http://www.irs.gov</small>		15. E-Verify # (4-6 Digits) / Date obtained <small>If 11 or more employees, please provide E-Verify number.</small>
16. Estimated Gross Receipts	<small>All businesses are subject to Audit by the City of Tucker Department of Finance. If selected for audit, Pursuant to City Ordinance Chapter 16-30, businesses must attach a copy of their prior year tax return (IRS forms 1120, 1065, or Georgia Forms 500 through 700).</small>		17. Number of Employees

PLEASE LIST PRINCIPAL OFFICERS OF BUSINESS

18. Name	Address	Phone	SS# (Last 4 Digits Only)
19. Name	Address	Phone	SS# (Last 4 Digits Only)

Certification

The information herein is required by Section 16 27 in the Code of Ordinances of the City of Tucker.

I, 20. Full Name	, being the	21. Title
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of the business firm named, do hereby register to operate said business with the dominant business activity of	22. Primary Business Activity
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Pursuant to the ordinance; the undersigned certifies that he/she is the person duly authorized by the business herein named to file this registration and application for a business license, including the accompanying schedules and statements, and that the same are true. The business license does not authorize the serving of alcohol. All applicable businesses must obtain a separate alcohol license. **A partnership requires both signatures.**

Applicant Signature	Title	Date
Applicant Signature	Title	Date

PENALTIES
 The City of Tucker shall assess a penalty in the amount of ten percent (10%) of the amount owed for each calendar year or portion thereof for:

1. Failure to pay occupation taxes and administrative fees when due;
2. Failure to file an application no later than April 30 of any calendar year, when the business or practitioner was in operation the preceding calendar year.

Delinquent taxes and fees are subject to interest at a rate of 1 percent per month.
 Issuance of a business occupational tax certificate is not to be considered as an approval of said business use and in no way confirms that said business meets the requirements of the City of Tucker Zoning Ordinance or the conditions of zoning approval.
 Any incidence of "nonconformity" relating to the above zoning requirements will subject the certificate holder to possible revocation of the certificate.

Parcel ID #	Lot	District	Zoning District	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
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The Zoning Enforcement Division processes business license applications to verify if a business can exist in the desired location. Zoning conducts research to verify that there is permitted use based on the district regulations. Some licenses may require site inspections or further research to determine approval, which will require additional days to review.

Routing Sheet Issued:

Occupational Tax Account

Permit Number:



Systematic Alien Verification for Entitlements Program

(SAVE) Affidavit Verifying Lawful Presence within the United States

SECTION 1

I, (print name) _____, swear or affirm under penalty of perjury that (check one):

- I am a United States citizen **(State of Federal Issued Photo ID)**
- I am a legal permanent resident of the United States **(Permanent Resident or Authorization Card)**
- I am a qualified alien or nonimmigrant under the Federal Immigration and Nationality Act 18 years of age or older lawfully present in the United States.

I am applying for the following public benefit (check one):

- Alcoholic Beverage License for _____
Print Business Name
- Alcohol Employee Pouring Permit
- Occupational Tax Certificate
- Door-to-Door Salesmen/Solicitors Permit
- Other: _____
Public Benefit

X _____
SIGNATURE OF APPLICANT

ALIEN REGISTRATION NUMBER

**Must be signed in the presents of a Notary*

NAME OF BUSINESS (if applicable)

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that the state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit.

***10 employees or less - Proceed to Section 3 for Notary.**

E-Verify (PRIVATE EMPLOYER AFFIDAVIT) SECTION 2

The Georgia Department of Law is a registered participant in the federal work authorization program commonly known as E-Verify, and uses such program to verify employment eligibility of all employees hired on or after July 1, 2007

EMPLOYER DOES NOT EMPLOY MORE THAN TEN EMPLOYEES – Proceed to notary section

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm, or corporation **employs more than ten employees** and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

FEDERAL WORK AUTHORIZATION USER IDENTIFICATION NUMBER

NAME OF PRIVATE EMPLOYER

DATE OF AUTHORIZATION

For more information on E-Verify: <https://www.e-verify.gov> or <https://law.georgia.gov/e-verify>

ALL APPLICANTS MUST SIGN BELOW, NOTARIZE, AND THEN RETURN THIS AFFIDAVIT WITH APPLICATION/PAYMENT TO OBTAIN YOUR BUSINESS TAX CERTIFICATE.

In making the above representation under oath, I understand that any person who knowingly and willfully making a false, fictitious, or fraudulent statement of representation in this affidavit shall be guilty of a violation of Code Section §16-10-20 of the Official Code of Georgia and face criminal penalties by such statute.

Executed on the _____ day of _____, 20____ in _____ (city), _____ (state)

Print Name and Title of authorized Officer or Agent

X _____
Signature of Authorized Officer or Agent *Must be signed in the presents of a Notary

SECTION 3

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20____.

Notary Signature

My commission expires: _____ / _____ / _____

NOTARY SEAL

HOME OCCUPATION SUPPLEMENTAL REGISTRATION FORM

Business Name: _____

Business Address: _____

Business Type: _____ Business Phone: _____

Applicant: _____ Residence Phone: _____

Brief Description of Business: _____

Definition: Home occupation is an occupation carried on by occupant of a dwelling unit as a secondary use of the dwelling unit of residential purposes, and is operated with applicable provisions of the Zoning Ordinance.

The following provisions shall apply to home occupation:

- a. There shall be no exterior evidence of the home occupation.
- b. No use shall create noise, dust, vibration, odor, smoke, glare or electrical interference that would be detectable beyond the dwelling unit.
- c. The use shall be conducted entirely within the dwelling unit, and only persons living in the dwelling unit shall be employed at the location of the home occupation.
- d. No more than 25 percent of the dwelling unit and or 500 square feet, whichever is less, may be used for the operation of the home occupation.
- e. No more than one business vehicle per home occupation is allowed.
- f. No home occupation shall be operated so as to create or cause a nuisance.
- g. Home occupation shall not include the use of a dwelling unit for the purpose of operating any automobile repair establishment, or car wash.
- h. Occupations that are mobile or dispatch-only may be allowed, provided that any business vehicle used for the home occupation complies with this section, and is limited to one business vehicle per occupation.

Note: A Special Land Use Permit is required for public contact on premises. Contact Zoning Department to initiate application process.

I certify that I reside at the address shown for the proposed business and that it is my principal residence. I have received a copy of the zoning regulations covering Home Occupations as shown and will comply with same. I am aware that failure to comply with all requirements will result in revocation of business license and / or legal action by City of Tucker.

Signature: _____ Date: _____

Resolution of the City of Tucker, Georgia

To Provide for an Inclusive, Fair and Welcoming City

WHEREAS, the Mayor and City Council of Tucker recognize the importance of embracing our City's diversity; and

WHEREAS, the Mayor and City Council of Tucker desire to ensure that all persons within the City have equal access to employment, housing, and public accommodations; and

WHEREAS, it is the purpose and intent of the Mayor and City Council of Tucker to protect and safeguard the right of all persons to be free from all forms of discrimination in regard to employment, housing, and public accommodations; and

WHEREAS, the Mayor and City Council of Tucker affirm Federal laws and those of the State of Georgia that define illegal forms of discrimination, including case law decided by the Supreme Courts of the United States and the State of Georgia,

Now therefore be it Resolved, that the Mayor and City Council of Tucker adopt this Statement of Values providing for an inclusive, fair and welcoming City:

People of every sex, sexual orientation, gender identity, race, color, age, physical/mental ability or disability, national origin, religion or beliefs, marital status, familial status, veteran or military status, who seek its peace and prosperity, are welcomed and encouraged to reside, work, recreate and worship in the City of Tucker; and

Discrimination by any individual or organization, whether public or private, based upon any person's actual or perceived sex, sexual orientation, gender identity, race, color, age, physical/mental ability or disability, national origin, religion or beliefs, marital status, familial status, veteran or military status, will not be tolerated in the City of Tucker; and

The health, safety and welfare of the City of Tucker increases when we regard and treat each other with respect, kindness and love; and

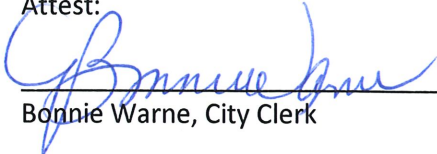
We add to the quality of life in the City of Tucker when we endeavor at every turn to gain understanding from our diverse backgrounds, experiences and individuality, and strength from our shared values of being inclusive, fair and welcoming.

Be it further resolved, the City Manager will cause this resolution to be distributed immediately through all communication channels operated by the City of Tucker; and

Be It further resolved, the City's Finance Director will ensure that a copy of this resolution be distributed to every holder of an Occupational Tax Certificate within the City of Tucker at least once per year.

So Resolved and adopted this 12th day of October 2021

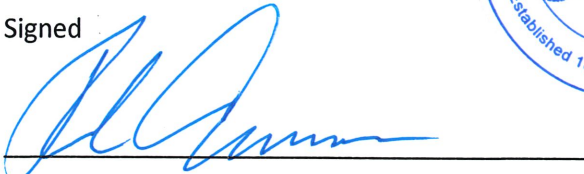
Attest:



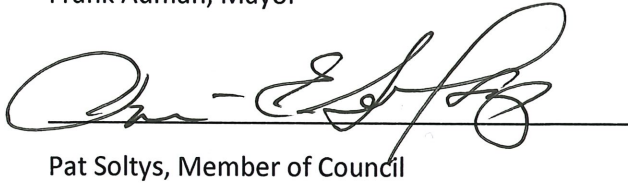
Bonnie Warne, City Clerk



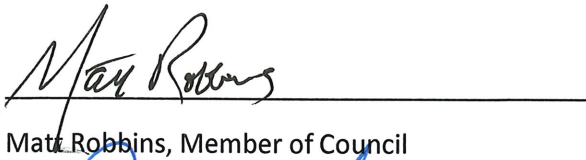
Signed



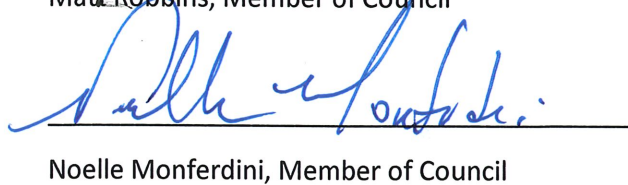
Frank Auman, Mayor



Pat Soltys, Member of Council



Matt Robbins, Member of Council



Noelle Monferdini, Member of Council



Anne Lerner, Member of Council



Michelle Penkava, Member of Council