TOWN OF KNIGHTDALE

FINANCE DEPARTMENT

www.knightdalenc.gov

950 Steeple Square Court
Knightdale, NC 27545
(v) 919-217-2212
(f) 919-217-2209

PRIVILEGE LICENSE APPLICATION

For office use only:
Date: _____
LIC# _____

For office use only:
Amount Paid: $ _____
Cash/CC/Check#: _____
Received By: _____
Date Received: _____

Date of Application: ____ / ____ / ____ **License Year Beginning July 1,** _____

☐ New Application ☐ Renewal ☐ Ownership Change ☐ Name Change ☐ Address Change

1. _____
Business Name (Indicate business trade name or D/B/A name.)

2. _____
Corporate Name (If different from Business Name; Sole Proprietorships should indicate the owner's name here.)

3. _____ / _____ / _____ / _____
Physical Address of Business Location. Please include any suite or apt #. Do NOT use a P.O. Box. City State Zip Code

4. _____ / _____ / _____ / _____
Business Mailing Address if different from #3. (All correspondence will be mailed to this address.) City State Zip Code

5. Type of State Contractor License Held: _____ License #: _____

6. (____) _____ _____ (____) _____
Business Phone Number Email Fax Number

7. Is the address for #3 located within the Knightdale Town Limits? ☐ No ☐ Yes 8. Is your business Home Based? ☐ No ☐ Yes

* Each business must have a principal location. A business is considered to be "Home Based" if the principal location of the business is a residence. If the answer to question #7 is "Yes", Zoning Certification at the bottom of this form must be obtained from the Knightdale Planning Department. You may contact the Planning Department at (919) 217-2245 or (919) 217-2243 to obtain the necessary paperwork. Please note, if your business is not located within the Town Limits, but is located within the Knightdale extraterritorial planning jurisdiction (ETJ), you will also need to obtain Zoning Certification.

9. Completely describe your business. Include all activities. Attach additional sheets if necessary: _____

_____

_____

_____

10. If you answered "Yes" to #7, provide date business began or will begin in Knightdale: ____ / ____ / ____ Number of Employees: _____

11. Type of Business Ownership: ☐ Corporation (including LLC's and S Corporations) ☐ Sole Proprietorship ☐ Partnership ☐ Other: _____

12. ***Applicant Information: This person will be the primary contact for the business. Sole Proprietorships should indicate the owner here.***

Last Name: _____ First Name: _____ M.I. _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Telephone #: (____) _____ Relationship to Business: _____

13. Does your business sell intoxicating beverages? ☐ No ☐ Yes

14. If you answered "Yes" to #7, does your business have more than one location in Knightdale? ☐ No ☐ Yes (If "Yes", list locations below or attach sheet.)

_____

ZONING CERTIFICATION: *(To be completed by the Knightdale Planning Department)*
The business use, if conducted in the manner approved, is permissible at the aforementioned location and therefore, issuance of a privilege license is appropriate.

Authorization: _____ Case # _____ Date: _____

Town of Knightdale
Privilege License Fee Worksheet

Schedule "A" **Privilege License Fees Based on Gross Sales/Receipts/Income**

New Business: Estimate gross receipts for 12 months, and apply the estimated amount to the tables below. **Exclude any income from activities under Schedule "B".**

Renewals: List the exact gross receipts as reported on your most recently completed tax return, and apply the amount to the tables below. **Exclude any income from activities under Schedule "B".** The license year runs from July 1 through June 30.

Gross Sales/Receipts:	**$** _____
License Tax (Section "A" Total)	**$** _____

The figures reported above are from ____ / ____ / ____ to ____ / ____ / ____

Schedule "B" & "C" **Privilege License Fees (NC General Statutes or Town of Knightdale)**

Business Activities	**License Tax**
_____	**$** _____
_____	**$** _____
_____	**$** _____
_____	**$** _____
Schedule "B" & "C" Total:	**$** _____

Calculating Past Due Fees and Penalties

Businesses that have operated without paying the privilege license fee are subject to late penalties in the amount of 5% every 30 days with a maximum penalty of 25%. The minimum penalty is $5.00. Delinquent fees and penalties are due for each license year (July 1-June 30) that the business has been in operation without obtaining a license. All privilege license fees, including past due fees and penalties must be paid before a privilege license will be issued.

Past Due and Penalty Calculations

License Year	Gross Receipts	Schedule Fees	Schedule Fees	Total Fees	Penalty %	Penalty Amount
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Total Past Due $ _____ **Total Past Due Penalty $** _____

Total Fees and Penalties

Schedule "A" Total $	_____
Schedule "B"&"C" Total $	_____
Total Past Due / Penalties $	_____
Total Amount Due $	_____

Payment Options: The Town of Knightdale accepts checks, money orders, credit cards (Visa, MasterCard, Discover), and cash payments.

I hereby certify that the information furnished in this application is true to the best of my knowledge, and that I understand that the purchase of a privilege license does not relieve the applicant of the responsibility from complying with all applicable Town of Knightdale Ordinances and with all State & Federal Laws and Regulations.

APPLICANT SIGNATURE: _____ **DATE:** _____

PRINT APPLICANT NAME: _____