



**AIKEN COUNTY TAX COLLECTOR  
APPLICATION FOR BUSINESS REGISTRATION**

**Kimberly Halcomb, Tax Collector**  
**(803) 642-2081**  
**(803) 502-1331 fax**

**828 Richland Ave. W.**  
**PO Box 873**  
**Aiken, SC 29802-0873**

County Registration No. \_\_\_\_\_

Year: **2012**

.....  
**Business Information**

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

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Location: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Property File No. \_\_\_\_\_ or County Jurisdiction No. \_\_\_\_\_

Type of Ownership: \_\_\_\_\_ Date Opened \_\_\_\_\_

Type of Business: Please describe in detail products or services provided.  
\_\_\_\_\_  
\_\_\_\_\_

.....  
**Owner Information**

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

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_

**All Business Registrations are due by July 1<sup>st</sup> and expire December 31<sup>st</sup> of each year**

I understand that issuance of a County Business Registration does not relieve me of the responsibility of meeting all county zoning and building code requirements, and that I am subject to all provisions of the Business Registration Ordinance No. 06-10-31 of Aiken County.

I certify that the information given in this application is true, that the Real Estate and Merchant taxes due and payable to the County have been paid.

\_\_\_\_\_  
Owner or Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Failure to Comply is a misdemeanor and you may be fined up to \$500.00 and/or imprisonment for not more than thirty (30) days for each violation.**