

Town of Rosepine
P.O. Box 528
Rosepine, La. 70659-0528
(337)463-8908

OFFICE USE ONLY	
LN	_____
DATE	_____
AMT	_____
CHK	_____

OCCUPATIONAL LICENSE TAX APPLICATION

(The tax is due January 1 for existing businesses, and is delinquent after the last day of February)

1. Date of return ____/____/____ (MONTH, DAY, YEAR)
2. New Business Renewal
3. Federal Employer ID number:
4. LA sales tax number:
5. Taxpayers name _____ Telephone Number: _____

Trade name:

Mailing Address, City, State, Zip Code:

Physical Location, Street Address, City, State, Zip Code:

6. Type of Business: Individual Partnership Corporation Governmental
 Non-Profit Other (specify) _____

7. Provide information on owner(s) below. If corporation or partnership, provide information for officers or partners. For corporation, provide state of incorporation:

NAME	TITLE	SOCIAL SECURITY NUMBER
RESIDENT ADDRESS		TELEPHONE NUMBER
NAME	TITLE	SOCIAL SECURITY NUMBER
RESIDENT ADDRESS		TELEPHONE NUMBER
NAME	TITLE	SOCIAL SECURITY NUMBER
RESIDENT ADDRESS		TELEPHONE NUMBER

8. Name and address of agent for service of process:

9. Nature of business – description of sales or activity:

I affirm that the information given on this application and the attached schedules is true and correct.

10. Signature of applicant _____ Title _____

Signature of preparer if different from above _____

SCHEDULE A: CALCULATION OF TAXABLE GROSS RECEIPTS

NEW BUSINESS

11. Check one

- Started new business on _____ (date)
- Purchased existing business-Name of previous owner _____
- Other (specify) _____

12. Check one box below and follow instructions to calculate taxable gross receipts:

BUSINESS OPENED THIS CALENDAR YEAR

Less than 30 days

- Between December 2 and December 31;
Total gross receipts for period of operation _____
- Prior to December 2; pay minimum tax; calculate remainder due
After first 30 days of operation using method immediately below

More than 30 days

- A. Gross receipts: _____
- B. Deductions*: _____
- C. A minus B equals taxable receipts: _____
- D. No. of days of operation _____
- E. C /D equals average gross receipts: _____
- F. (D) times (C) equals estimated taxable gross of: _____

BUSINESS OPENED DURING THE PREVIOUS CALENDAR YEAR

- A. Gross receipts: _____
- B. Deductions*: _____
- C. (A) minus (B) equals taxable receipts: _____
- D. No. of days of operation _____
- E. C/D equals average gross receipts: _____
- F. 365 times (E) equals estimated taxable gross of: _____

EXISTING BUSINESS

- A. Gross sales/Receipts: _____
- B. Deductions*: _____
- C. (A) minus (B) equals taxable receipts: _____

RETAIL DEALERS OF GASOLINE AND MOTOR FUELS

- A. Gross sales/receipts: _____
(DO NOT INCLUDE SALES OF MOTOR FUELS)
- B. Deductions*: _____
- C. (A) minus (B) equals taxable receipts _____
- D. Tax due from table 1 _____
- E. Gallons of gasoline and motor fuels sold _____
- F. Tax due on line (E) from table 1.1 _____
- G. Total tax due (D) plus (F) _____
- H. Maximum tax due _____ \$6,200.00
- I. Enter the lesser of (G) or (H) _____

***DEDUCTIONS ARE ONLY ALLOWABLE FOR THESE BUSINESSES: SERVICE STATIONS,
INTERSTATE SALES OF STOCKS & BONDS, AND UNDERTAKERS.**

13. Class: Retail Wholesale Commission Public Utilities Lending Other

14. Use appropriate table to calculate tax due:
(For others, professionals, or pharmacies multiply taxable receipts by .1%) _____

15. Flat fees:

ITEM	NUMBER	FEE	TOTAL FOR ITEM
		TOTAL FOR FLAT FEES	

16. Amount of tax due (total of lines 14 and 15) _____

17. Interest (1 ¼ per month of the tax due from the due date until tax is paid): _____

18. Penalty (5%of the tax due for each thirty days, or fraction thereof, from the due date
Until the return is filed, but is limited to a total of 25%): _____

19. Total amount due: _____