Business Tax Office

P.O. Box 1028 400 Main St, Ste 450 Knoxville, TN 37901 (865) 215-2083 (865) 215-2621 www.knoxvilletn.gov

NEW BUSINESS CHECKLIST

1. <u>BUSINESS LICENSE</u>

A business located inside the city limits will require both a City of Knoxville and a Knox County business license. Based on your expected yearly gross receipts, either a standard business license or a minimum activity license should be obtained. The application fee for each is \$15.00. A City of Knoxville business license may be obtained from the above location. A Knox County business license may be obtained from the Knox County Clerk's office (865) 215-2392.

2. SALES TAX NUMBER

Many businesses will require a state sales tax number. Their office is in the State Office Building located at 7175 Strawberry Plains Pike, Suite 300. Their office number is (865) 594-6100.

3. FEDERAL EMPLOYER'S ID NUMBER

A federal employer's ID number may be required if a business has employees. This number is obtained from the Internal Revenue Service. Their offices are located in the John Duncan Federal Building on Locust Street. The phone number for the IRS is (800) 829-1040.

4. ZONING RESTRICTIONS

The business site should be reviewed with the City of Knoxville Plans Review to ensure the business activity proposed is appropriate for the location. Their offices are located on the fourth floor of the City County Building located at 400 Main Street. Their phone number is (865) 215-2999.

5. <u>FOOD SERVICE LICENSING</u>

If the business will serve food or beverages, check with the Knox County Health Department to be sure that all requirements are being met. Their phone number is (865) 215-5200.

6. ALCOHOLIC BEVERAGE SALES LICENSING

If alcoholic beverages will be sold or served, certain state law and city code restrictions will apply. To apply for a city beer permit contact the City of Knoxville Beer Permits Office at (865) 215-2083. For liquor licensing, contact the State Alcoholic Beverage Commission at (865) 594-6342; you are also required to obtain a City of Knoxville liquor license after State approval. To obtain the City of Knoxville retail package store certificate of compliance contact City of Knoxville Business Tax Office at (865) 215-2083.

7. NEW BUSINESS QUESTIONS

Questions about the establishing of a new business may be directed to the Small Business Development Center at (865) 246-2663. You can also contact the Greater Knoxville Service Corps Of Retired Executives (SCORE) for assistance in opening a new business. They can be reached at (865) 545-4203 or www.scoreknox.org.

City of Knoxville Application for Business Tax License

Department of Finance Revenue Office Business Tax Division

INCOMPLETE APPLICATIONS WILL BE RETURNED UNPROCESSED

P.O. Box 1028 Knoxville, TN 37901 (865) 215-2083

1.	Reason for Applying:	□ NEW Bu	siness	☐ Additional Locatio		on	☐ Purchase of existing business		iness
	License Type:	☐ Regular License		☐ Minimal Activity License		e (Will do le	do less than \$100K in gross receipts annual		
	Fiscal Year End (MM)								
2.	BUSINESS NAME AND EXACT LOCATION				BUSINESS MAILING ADDRESS				
2.	Business Name				Name (Enter Legal Name, If Different)				
	Street or Highway (Do not use P.O. BOX number)				P.O. Box, Street, Route or Highway				
	Apartment or Suite Number (Do not enter P.O. Box)				Apartment or Suite Number				
	City State Zi		Zip C	ode	City State Zip Code			de	
3.	Business Telephone Number				Business Fax Number				
	Contact Person's Name			Contact E-Mail Address					
	FEIN or SSN (REQUIRED IN ORDER TO PROCESS)				If Business Located Inside a Tennessee City? □ No □ Yes If yes, Name of City:				
4.	Type of Ownership (Select One): Proprietorship Husband/Wife Ownership PLLC Other: Partnership Corporation Limited Liability Company								
	Ownership Demographic: (Not Required) Not for Tax Purposes / Business Support Purposes Only Minority Owned Small Business Service Disabled Veteran Owned Se								
	Describe the business activity at this location, stating the major product and/or services sold:								
5.	Opening Date: Sales Tax No. Sec of State ID #			Will This Business Charge for Admissions? ☐ Yes ☐ No					
				Will This Business Sell Alcoholic Beverage? ☐ Yes ☐ No					
				State Bus Tax Acct #					
6.	Identify the owner(s), officers and/or partners. Attach additional sheets if necessary.								
	Last Name First Name MI		Social Security Numb		per (required)		□ Owner-Individual □ Owner-Company □ Partner □ Officer □ Member		
a.	Street Address. Do NOT use a P. O. Box		City		State Zip	Phone I	Number		
b			Social Se	ecurity Numb	oer (required)		□ Owner-Individual □ Owner-Company □ Partner □ Officer □ Member		
b.	Street Address. Do No	OT use a P. O. Box	City		State Zip	Phone I	Number		
7.	TOTAL APPLICATION	N FEE				•			\$15.00
	THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. The individual/owner, a partner or an officer of the corporation must sign application. The signatory must be listed in No. 6.								
8.							-		
I.	Signature of Own	er, Partner or Corpor	ate Office	r (Do Not P	rint)		Date		