

**CITY OF SENECA**  
**NONRESIDENT BUSINESS LICENSE APPLICATION**

I will need the following information to process a business license for the City of Seneca:

Correct spelling of business name: \_\_\_\_\_

correct spelling of owner's name: \_\_\_\_\_

complete mailing address: \_\_\_\_\_

complete physical address of your business: \_\_\_\_\_

phone number: \_\_\_\_\_ fax number: \_\_\_\_\_

emergency contact information (name, phone number, address) \_\_\_\_\_

federal id #: \_\_\_\_\_ OR social security #: \_\_\_\_\_

a brief description of the type of work you will be doing: \_\_\_\_\_

ADDRESS OF JOB: \_\_\_\_\_

\$ AMOUNT BEING PAID FOR JOB: \_\_\_\_\_

If you are paying for a business license and a permit, you may pay with one check. We accept cash, check, money order, Visa, MasterCard, and Discover. We also accept payment with VISA, MasterCard, or Discover over the phone.

Ann Beatty, Finance Administrative Assistant  
Mailing Address: P O Box 4773, Seneca, SC 29679  
Physical Address: 221 E N 1<sup>st</sup> Street, Seneca, SC 29678  
ph: 864-885-2700 fax: 864-885-2701 email: abeatty@seneca.sc.us

Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY:**

Business License ID#	Payment Amount	Type of Payment	Receipt #	Date Paid
	\$	Cash Ck# _____ CC MO		

Report Code/NAICS \_\_\_\_\_ Fee Code/RATE \_\_\_\_\_