

CITY OF SPRINGDALE

BUSINESS LICENSE PROCEDURE

Chapter 26 of the City of Springdale Code or Ordinances requires that any person who engages in, carries on or follows any trade, business, profession, vocation or calling, within the corporate limits of the City, unless exempt by State law, to have a Business License. The license is issued by the City Clerk and terminates on March 31st of each year.

In addition, this procedure applies to any previously licensed business that has changed its type of business, location or ownership.

The license will not be issued for a business if the premises and building do not fully comply with the building codes of the City or if the operation would involve a violation of the zoning ordinance.

The application procedure is as follows:

- STEP 1.** Complete the top portion of the Business license application. Please sign the application and proceed to Step 2.
- STEP 2.** The completed application must be taken to the Planning Department, at 201 Spring Street, Room 214 for verification of zoning. (479-750-8550) This step must be completed before proceeding to Step 3.
- STEP 3.** Set up an appointment with the Building Inspection Department for an on-site inspection of your business. The Building Official and the Fire Inspector will meet with you to sign your application at the time of the inspection. (479-750-8557)
- STEP 4.** Please bring the completed & signed application to the City Clerk's office at 201 Spring Street to purchase your business license. (479-750-8118)

The Business License fee is prorated throughout the year:

\$40.00 per year, plus \$2.50 for each of the first 25 employees, excluding the owner of a sole proprietorship, employed by such business, and an additional \$1.00 per year for each and every employee over 25. There is a maximum fee of \$300.00 per year.

OTHER REQUIREMENTS FOR OPENING A BUSINESS IN THE CITY LIMITS OF SPRINGDALE:

1. If you are a Restaurant/Club/Large Attendance Facility and serving beer and wine you will need to purchase a Beer Permit from the City Clerk's Office. If you are serving mixed drinks, you will be required to pay a monthly 5% Supplemental Beverage Tax on mixed drinks to the City Clerk's Office. Forms are found on the website: Springdalear.gov/City Clerk/Forms & Documents. If you have not obtained a permit from the state you will need to contact the Alcoholic Beverage Control Department at 501-682-8174. A permit from the state is required before a city permit can be issued.
2. If you are a Hotel/Motel you are required to collect and remit a 2% Hotel/Motel Tax required by the City of Springdale. The City Clerk's Office can provide reporting forms or they can be found on the city's website: springdalear.gov
3. No license shall be issued for the conduct of any business until the applicant submits a copy of its State of Arkansas sales tax permit, or provides proof of a state sales tax identification number, as required by the State of Arkansas for the business. You will be responsible for contacting the Arkansas Sales & Use Tax Division at (501) 682-1895 or atap.arkansas.gov
4. Food establishments will need to contact the Arkansas Department of Health for any permits/licenses they might require at (479) 521-8181.
5. All businesses are required to assess their business personal property with either the Washington County Assessor at (479) 444-1641 or Benton County Assessor at (888) 267-7337.
6. To obtain a Federal Tax Identification number for your business, you can contact the Business & Specialty Tax Line at (800) 829-4933 or go online to www.irs.gov
7. Other resources for opening up a small business are the University of Arkansas Small Business Development Center at (479) 575-5148 or Small Business Start-Up at www.sba.gov.

Business Start Date: _____

License No. _____

CITY OF SPRINGDALE
APPLICATION FOR BUSINESS / OCCUPATION LICENSE
201 Spring Street, Room 203
Springdale, AR 72764
479-750-8118

NAME OF BUSINESS: _____

OWNER: _____ OWNER'S PHONE NO: _____

BUSINESS STATUS: NEW RELOCATING ADDITIONAL LOCATION

BUSINESS PHYSICAL LOCATION: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP CODE: _____

BUSINESS PHONE: _____ BUSINESS EMAIL: _____

BUILDING OWNER: _____

DETAILED DESCRIPTION OF SERVICE OR PRODUCTS PROVIDED: _____

FEDERAL TAXPAYER I.D. OR SOCIAL SECURITY NO: _____

AR SALES & USE TAX PERMIT NO: _____

FULL-TIME EMPLOYEES: _____ PART-TIME EMPLOYEES: _____

EMERGENCY CONTACT: _____ PHONE: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE
PLANNING OFFICE ROOM 214 - ZONING/STREET ADDRESS CERTIFICATION

ADDRESS ASSIGNED: _____ SEC: _____ T: _____ R: _____

ZONING DISTRICT: _____ A-1, _____ 0-1, _____ C-1, _____ C-2, _____ C-3, _____ C-4, _____ C-5,
_____ C-6, _____ W-1, _____ I-1, _____ I-2, _____ I-3, _____ P-1, _____ PUD, _____ OTHER

_____ DESIGNATED USE UNIT NO. _____ CHANGE OF USE: YES NO

_____ PROPOSED USE IS PERMITTED IN THE ZONING DISTRICT ABOVE

_____ PROPOSED USE WAS GRANTED A CONDITIONAL USE BY PLANNING COMMISSION

ON _____

_____ PROPOSED USE HAS BEEN RECOGNIZED AS A NON-CONFORMING USE

SIGNATURE _____ DATE: _____

BUILDING OFFICIAL (CALL 479-750-8557 FOR INSPECTION APPOINTMENT)

SIGNATURE _____ DATE: _____

FIRE PREVENTION BUREAU

SIGNATURE _____ DATE: _____

CITY CLERK'S OFFICE

SIGNATURE _____ DATE: _____