

Notice: The City of Macon Code of Ordinance requires all businesses to annually register and pay an occupation tax for the privilege of operating a business in the City of Macon. Failure to register and pay the annual occupation tax will result in legal action and fines.

1. All business locations must have a **Zoning Compliance** issued by the Macon-Bibb County Planning and Zoning Commission. Please attach the zoning compliance to the application. Planning and Zoning is located at:

**682 Cherry Street
9th Floor City Hall Annex**

**Monday through Friday
8:30 a.m. until 5:00 p.m.
(478) 751-7450**

****PLEASE ATTACH A COPY OF YOUR ZONING COMPLIANCE TO THE APPLICATION****

2. All business locations must have a **Building Inspection**. Home Occupations are the exception to this rule unless there will be customers and/or employees coming into the home. Appointments with Inspectors can be arranged by calling:

**(478) 751-7280
682 Cherry Street
5th Floor City Hall Annex**

**Monday through Friday
7:30 a.m. – 8:30 a.m.
3:30 p.m. – 4:00 p.m.**

An inspection of the business location has been performed and the structure appears to be in a reasonably suitable condition for occupancy.

Inspector's printed Name _____ Inspector's
Signature: _____

Date of Inspection _____

3. All business locations must have a **Fire Inspection**. Home Occupations are the exception to this rule unless there will be customers and/or employees coming into the home. The Fire Prevention Bureau can be reached by calling:

**(478) 751-2700
1111 First Street
Fire Prevention Building**

**Monday through Friday
8:30 a.m. until 5:30 p.m.**

The Fire Prevention Bureau has inspected the business location and hereby approves the building for use as a _____ occupancy.

Inspector's printed Name _____ Inspector's
Signature: _____

Date of Inspection _____

4. After completion of steps 1, 2, and 3, return this form, copy of Zoning Compliance, completed Occupation Tax Return and payment to:

**Business License Office
700 Poplar Street
Room 308 City Hall Building
(478) 751-7258**

**Mailing Address:
P. O. Box 247
Macon, Georgia 31202-0247
Monday through Friday
8:30 a.m. until 5:30 p.m.**

I hereby certify the above information to be true and correct. I have read and understand the application procedure. I also understand that I will not open until my business has been registered and occupation tax paid for this location.

Name of Business and Address

Signature of Applicant

