

City of Denham Springs

Opening Your 'Itinerant' Business

In the City Limits

The Occupational License Tax is a tax imposed on each person pursuing or conducting a trade, profession, vocation, calling or business within the municipality of Denham Springs. Under the Louisiana Constitution and laws of the state of Louisiana, guidelines are set on classification and rates for a business commencing after the first day of January of any calendar year. If a "change of ownership" occurs the new owner must apply for a license.

Each person is required to keep reasonable records. Separate records are required for each place of business.

For legal clarification of tax liabilities and filing requirements, refer to Chapter 3 of Title 47 of the Louisiana Revised Statutes of 1950.

BUSINESS STRUCTURES

An important step in forming a new business is to determine the type of business structure that you will use. There are several business structures to choose from, including sole proprietorship, partnership, corporation, limited liability company and limited liability partnership. Each has advantages and disadvantages as well as tax consequences of which you should be aware. You must decide which of these structures best suits your business objectives and needs. The City of Denham Springs and Secretary of State cannot advise you on choosing a business structure. For help in making this decision, you may wish to consult a tax practitioner, accountant or attorney.

- Individual or Sole Proprietorship- A business where only you, or your spouse, own the business even though you may have employees.
- Partnership- A Business where two or more people own the business jointly.
- Corporation- A business which is treated by law as an entity. It has a life separate from its owners or stockholders. Many corporations begin as a sole proprietor or partnership.
- Limited Liability Corporation- An entity that is an unincorporated association having one or more members organized and filing articles with the Secretary of State.
- Foreign Corporations- A Corporation organized outside the state may obtain a certificate of authority to transact business in Louisiana by filing an application with the Secretary of State's Corporation Division by appointing a registered agent to accept service of process. For more information: SSCD (225) 925-4704

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Complete the Occupational License Application (All four pages) and return with your remittance to the Business License Department at 941 Government Street, or mail to:

Any questions should be directed to this office at (225) 667-8310.

City of Denham Springs Attn: Business License Dept P O Box 1629 Denham Springs LA 70727

Other Important Phone Numbers:

Livingston Parish School Board - Sales Tax I D #	(225) 686-3043	www.laota.com/parish/livingston1.htm	
[Collects City and Parish]			
Livingston Parish Health Department	(225) 686-7017	new.dhh.louisiana.gov/index.cfm/directory/detail/4812	
Denham Springs Newspaper	(225) 665-5176	www.livingstonparishnews.com	
State of Louisiana - Sales Tax I D #	(225) 219-7318	www.rev.state.la.us	
Building Permit Office - Building Inspections	(225) 667-8326	www.denhamsprings.us/planning.shtml	
Secretary of State - Business Name Availability	(225) 925-4704	www.sec.state.la.us	
State Office of Alcohol & Tobacco Control	(225) 925-4041	www.atc.rev.state.la.us	
Fire Dept HeadQuarters	(225) 667-8345	www.denhamsprings.us/fire.shtml	

OCCUPATIONAL LICENSE FEES

Retail Dealer-No Fixed Place (Itinerant Vendor)	\$200.00
Agricultural/Seafood – No Fixed Place	\$100.00

[ANNUAL RENEWALS ARE MAILED OUT IN DECEMBER AND DUE JANUARY.]

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NOTICE Attention: All Prospective Business Owners and Occupational License Holders

Do you and/or your business intend to purchase any items from "walk-in" customers who enter your business in hopes of selling you something?

If the answer is "Yes", please inquire with the Business License Department about a "**SecondHand Dealer's License**". This license is required of all individuals and businesses who intend to purchase "ANY" item that is brought to them and offered for sale by a "walk-in" customer.

Pursuant to LA RS 37:1869, failure to comply with these laws can result in Arrest, Incarceration, Fines and the Suspension of your Business License.....so protect yourself, your employees and your business.

Once you have received your "Secondhand Dealer's License" please contact the Denham Springs Police Department, to set up an appointment to ensure you are following all of the laws prior to conducting any business.

Denham Springs Police Department 225.665.5106 ext 232

City of Denham Springs

ITINERANT VENDOR CHECKLIST

Attn: Business License Office P O Box 1629 Denham Springs LA 70727 Phone: 225-667-8310

Applicant	Office	
		Completed Application
		Copy of Driver's License or ID
		Corporation: Officers- Name, Address, Ph #, DOB, POB DL # / State & SS #
		Property Owners Permission Letter
		Sales Tax ID# from L P School Board LAOTA.com Phone # 686-3043
		Fee of either \$100.00 or \$200.00
		Chain Store License, if needed
		Copy of Lease, if needed
		nailing address, and location address must match exactly on all paperwork submitted with this application. License Expires on Dec. 31. are mailed at the end of the year for the upcoming year.
Please In	ntitial:	Please Intitial:
		Applicant Office

CITY OF DENHAM SPRINGS OCCUPATIONAL LICENSE APPLICATION ITINERANT VENDOR

Attn: Occupational License Tax		Application Date	
P O Box 1629		Application Date	
Denham Springs, LA 70727-1629		Date Business Starts at this location:	
(225) 667-8310			
Business			
Name:			
Business Location:			
Mailing	City, State		
Address:	•		
Owner's Name:	SS	S #	
Cell Ph #: Hn			
Owner's Resident Address			
	poration Governmental		□ Other
PROVIDE INFORMATION ON OWNER(S) BELOV OR PARTNERS. FOR CORPORATION, PROVIDES		RRSHIP, PROVIDE INFORMATION OF	N OFFICERS
Name:		Title:	
Phone # (s)	S.S.	#	
Resident	City, State		
Address:	& Zip		
Name:		Title:	
Phone # (s)	S.S.	#	
Resident	City, State		
Address:	& Zip		
Name:		Title:	
Phone # (s)	S.S.	#	
Resident	City, State		
Address:	& Zip		
Vehicle License #	State Attach co	opy of Driver's License Ye	s No
Nature of Business: (Description of Sales or a to be earned) Retail - No Fixed Place			
Livingston Parish Sales Tax I.D. # 686-3043 If Selling Retail - You Must have Sales T	ax ID # or complete Sales Tax Form	ted Building Permit Office	ATE
Signature of Applicant			
	t the information given on this application		
OFFICE USE: Vendor # Bus.	Code Amt Due:	Recpt / Ck # _	
		_	

OCCUPATIONAL BUSINESS LICENSE INFORMATION

NEW BUSINESS INFOR	MATION
NAME OF BUSINESS:	
LOCATION ADDRESS:	/Retail Dealer-No Fixed Place
MAILING ADDRESS:	
OWNER:	
OWNER'S CELL PH #:	
BUSINESS PH #:	
CONTACTS: IN CASE OF	EMERGENCY: (Other than yourself)
NAME:	PHONE:
NAME:	PHONE:
NAME:	PHONE:
Owner Signatu	re Date

PROPERTY OWNERS PERMISSION

I, (name)	, the owner of property located
at	, do hereby grant (name)
permission to set up and display for sale; g	goods, wares or merchandise on the above
sited property on the following dates	
Date	Signature

COMPLETE AND SUBMIT WITH OCCUPATIONAL LICENSE TO BUSINESS LICENSE DEPARTMENT.

Application for Livingston Parish School Board Sales & Use Tax Registration Certificate

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Federal Employer ID Number	LA Sales Tax Number	LA Sales Tax Number		Local Sales Tax Number Issued		
Tax Payer Name				e Number		
Trade Name Em			Email Add	nail Address		
Mailing Address City, State, Zip Code						
Location Address-Street,City,State, Zip Code				In City Limits	Social Security #	
Type of Organization: Individual Pa Non-Profit	☐ Other (Specify):	ion □ Governme	ental			
Please complete if Corporation or Partnership, Inc.	ude Officers or Partners:					
Name	Title		Socia	l Security Number		
Resident Address			Phon	Phone Number		
Name	Title	Title		Social Security Number		
Resident Address			Phon	Phone Number		
Name	Title		Socia	Social Security Number		
Resident Address Phone Number						
Date Business Started/Acquired at This Location: Name and Add Output Date Business	Name and Address of Agent for Service of Process:			Location of Accounting Records:		
orporation, State of Reason for Applying: Reason for Applying: Purchased Going Business Name of Previous Owner: Name of Previous Owner:						
What is the Nature of this Business? Describe your Sales or Activity:						
I affirm that the information given on this application and attached schedule is true and correct.						
Signature:		Title:			Date:	

Livingston Parish School Board

Sales and Use Tax Division P O Box 1030 Livingston, LA 70754

Phone: (225) 686-3043 Website: LAOTA.com Fax: (225) 686-0438