

TRANSIENT MERCHANT INFORMATION SHEET

Dear Transient Merchant;

Thank you for choosing to do business in the City of Auburn. To obtain a license to conduct business as a transient merchant you are required to:

- Complete the *Application for a Transient Merchant License* (see below)
- Remit a \$505 deposit, which will be credited to your account until the completion of your business, or the end of the current calendar year, whichever comes first.
- Submit a letter of permission from the property owner of the location where your business will be set up, which will be forwarded to the City of Auburn Planning Department for zoning approval.
- Provide a copy of your driver's license.
- If preparing/serving food you will need to contact the Lee County Health Department at (334) 745-5765, located at 1801 Corporate Dr, Opelika, AL to schedule an inspection and obtain a food permit.

The transient merchant license is active from the date of issuance until the end of the current calendar year (December 31st). If you are setting up at multiple locations, you will need to submit a \$505 deposit for each location and obtain a letter of permission for each location.

From the \$505 deposit, the City of Auburn will withhold the business license fee of \$150 plus the issuance fee of \$5, sales taxes of 4 percent of taxable sales, and an occupational license fee of 1 percent of the gross wages earned by employees while working in the city.

You may request a refund of the remaining deposit by completing the Transient Merchant's Report of the Calendar Year Business Activity which will be provided to you upon the issuance of your business license. To obtain the refund, this form must be returned to the Revenue Office by **the last business day of February** of the year following the calendar year in which the transient merchant conducted business within the City. If the form is not submitted to the Revenue Office by this date, you will forfeit your deposit to the City of Auburn.

If you have any questions, you may contact the Revenue Office at (334) 501-7239 or email revenue@auburnal.gov.



APPLICATION FOR TRANSIENT MERCHANT LICENSE

BUSINESS INFORMATION	ON									
1. Name of Person Submitting Aplimited partnership)	plication (must be the busin	ness owner, corp	porate officer	if a corpo	oration, manager if a	ı LLC, or partn	er if gen	neral or		
2. Business Name or Name of Corporation					Business Federal Identification Number					
3 Permanent Business Street Add	ress			City		State	Zip			
4 Permanent Business Phone Number				5 Cell Phone/Local Number Where You May Contacted While Conducting Business						
6 Mailing Address for Business				City		State	Zip			
LOCAL (TRANSIENT) B	USINESS INFORM	ATION								
7 Provide the Property Owner/Bus	iness Name, Address, and	Contact Information	ation Where I	Business A	Activities Will Be Co	onducted in the	City of	Auburn		
Property Owner/Business Name	Telephone #	S	treet Address		City	St	ate	Zip		
8 Local Address Where Business Activities Will Be Conducted in the City o				City		State Zip				
9 Provide a Detailed Description of	of Business Activities That	Will Be Condu	cted in the Ci	ty of Aubi	urn	ı	ı			
10 Date(s) Business Activities Wi	ll Be Conducted in the City	of Auburn	11 Hours o	of Operation	on of Business Activ	rities in the City	of Aub	ourn		
OWNER/EMPLOYEE IN										
12 Provide the Name, Home Addr Business (Attach additional sheets		ber, Date of Bi	rth, Driver's I	License N	umber/State of Perso	on(s) Legally R	esponsil	ble for		
Name	Street Address	City	State	Zip	Date of Birth	Telephone #	DL	State/Nbr		
13 Provide the Name, Home Addr additional sheet if necessary)	ess, Home Telephone Num	ber, Driver's L	icense Numb	er/State W	/ho Engage in Busin	ess in the City	of Aubu	rn (Attach		
Name	Street Address		Citv	State	e Zip	Telephone #	DL Sta	ate/Number		

DECLARATION AND VALIDATION OF INFORMATION

Under penalties of perjury, I declare that I have examined this form at correct, and complete. My signature indicates that I take full responsion any tax liability of this business that might occur.	, , , , , , , , , , , , , , , , , , ,	ıd
Signature of the Person Completing This Registration Form	Date	
Print Name of the Person Completing This Registration Form		

TRANSIENT MERCHANT REQUIREMENTS AND GENERAL INFORMATION

- Complete a *Transient Merchant Application*
- Remit deposit of \$505, of which a minimum of \$155 is a non-refundable business license fee
- Submit a letter of permission from property owner of the location where business activities will be conducted (*Location must be approved by City of Auburn Planning Department and/or Auburn University before license can be issued*)
 - No individual/business shall be licensed to conduct business on the City's right of way (i.e. sidewalk, streets); thus concluding that walking around and selling merchandise is not permissible
- Provide copy of driver's licenses or State issued identification card
- Provide copy of food permit issued by Lee County Health Department, if applicable
- License is valid from the date of purchase until **December 31**st; license **must** be renewed each year
- License is only valid for the location approved by the City of Auburn Planning Department and/or Auburn University
- License must be displayed in a location visible to customers as well as City of Auburn enforcement representatives

FEE AND PAYMENT INFORMATION

- Deposit: \$505
- License Fee: Minimum of \$155 (includes \$5 issuance fee), will be withheld from deposit at conclusion of business activities when the *Transient Merchant's Report of Calendar Year Business Activities* form is filed, reviewed, and approved
- Sales Taxes: Of the nine per-cent (9%) collected, four per-cent (4%) will be remitted to the City of Auburn
- Occupational License Fees: One per-cent (1%) of gross wages earned by employees while conducting business in the City of Auburn
- Payment: Web payment portal: https://selfservice.auburnal.gov/css

To be Completed by Officer of Business

To be Completed by Finance Department

Transient Merchant's Total Tax and Fee Liability:

		alendar Ye		Busine	ess i	Acti	vity	
Business Name:				City Tax	paye	r ID #		
Gross receipts for sales in Auburn for Calendar ye	ear	_				\$		(A)
Gross receipts for tax-exempt sales in Auburn for calendar year				\$				(B)
Gross wages paid to employees while located in	Auburn for ca	alendar year		_		\$		(C)
Dates on which business was conducted in Aubu	rn:				(C		ocation ete Address)	
From	to			 -				_
From	to			- 				<u>-</u> -
From	to			-				_
entity, having the authority to bind the above des declare the above information to be true and corre knowledge and belief.			of R	epresenta	ative		Date	
Business License Fee:				•				
Gross Receipts (A),up to \$1,000,000.00	\$		x	0.0015		\$	Date	(D)
Gross Receipts (A),up to \$1,000,000.00 If Gross Receipts (A) Exceed \$1,000,000.00 t			x			\$	Jaio	(D)
	hen add:			0.0015 (Rate)	=	\$	Date	_``
If Gross Receipts (A) Exceed \$1,000,000.00 t		Total	×	0.0015	= +	\$_ *_ *_ *_	Date	(D) (E) (1)
If Gross Receipts (A) Exceed \$1,000,000.00 t	hen add: \$ on line (1) p		x 55.(0.0015 (Rate) 0.0012 (Rate) D+E	= +	\$_ \$_ \$_		(E)
If Gross Receipts (A) Exceed \$1,000,000.00 t Gross Receipts over \$1,000,000.00	hen add: \$ on line (1) p	lus \$5.00 or \$1	x 55.(0.0015 (Rate) 0.0012 (Rate) D+E	= +	\$ \$ \$ \$		(E) (1)
If Gross Receipts (A) Exceed \$1,000,000.00 t Gross Receipts over \$1,000,000.00 Business License Fee (The greater of amount Sales Tax Liability:	hen add: \$ on line (1) p	lus \$5.00 or \$1 Minimum Licer	x 55.(nse	0.0015 (Rate) 0.0012 (Rate) D+E 00 Fee))	= +	\$ \$ \$		(E) (1) (2)

Transient Merchant Deposit Paid \$ Balance Due to City [(7)>(6)] Balance Owed to Taxpayer [(6)>(7) \$

(2) + (3) + (4) =

\$ (5)