Gross Annual Sale Form

Permit #			
Name of Estal	olishment/DBA:		
Name of Establishment/DBA:			
Telephone #:_			
Address:			
Email address	:		
Indicate the ap	oplicable gross annual sales to the fee	amoui	nt:
Less than \$20	0,000		\$200.00
\$200,000 -	\$ 400,000		\$300.00
\$400,000 -	\$ 600,000		\$400.00
\$600,000 -	\$ 800,000		\$500.00
\$800,000 -	\$1,000,000		\$600.00
\$1,000,000-	\$2,000,000		\$700.00
\$2,000,000 -	\$3,000,000		\$900.00
over \$3,000,000			\$1,200.00
			Payment Total \$
Please provide one of the additional documents below to verify your gross annual sale amount: <i>(check one)</i>			
Copy of 2022 or 2023 Federal or State Tax Return			
Sworn Statement by a Certified Public Accountant with 2023 gross annual sale amount			
Sworn Statement by Owner of establishment with 2023 gross sale amount			
*Failure to prov	vide the proper documentation will resu	lt in a f	fee assessed at the highest amount.
Signature 7		Title	<u> </u>