Out of State Contractors Information

1. Contractors who are based out of the State of Tennessee and come into the City of Knoxville to perform a job must obtain a City of Knoxville Business License and pay the appropriate application fee. Tennessee Code Annotated 67-4-706.

2. Out of State Contractors **MUST** also complete **ONE** of the following tasks.

   A. Attach to the application a $500 (five-hundred dollar) check to establish an escrow account. These funds must be certified funds. This amount is in addition to the application fee. Tennessee Code Annotated 67-4-707(a).

   -or-

   B. Contact an insurance company, and have the enclosed ‘Out of State Contractor’s Bond’ completed and returned to our office attached to the application. Tennessee Code Annotated 67-4-707(a).
# City of Knoxville

## Application for Business Tax License

**Department of Finance**  
**Revenue Office**  
**Business Tax Division**  

**INCOMPLETE APPLICATIONS WILL BE RETURNED UNPROCESSED**

**P.O. Box 1028**  
**Knoxville, TN  37901**  
**(865) 215-2083**

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### 1. Reason for Applying:

- NEW Business
- Additional Location
- Purchase of existing business

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### 2. Business Name and Exact Location

<table>
<thead>
<tr>
<th>Business Name</th>
<th>Name (Enter Legal Name, If Different)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street or Highway (Do not use P.O. BOX number)</td>
<td>P.O. Box, Street, Route or Highway</td>
</tr>
<tr>
<td>Apartment or Suite Number (Do not enter P.O. Box)</td>
<td>Apartment or Suite Number</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<tbody>
<tr>
<td></td>
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</tbody>
</table>

### 3. Business Telephone Number

**Business Fax Number**

<table>
<thead>
<tr>
<th>Contact Person's Name</th>
<th>Contact E-Mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County In which Business is located:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**If Business Located Inside a Tennessee City?**

- No

- Yes

**If yes, Name of City:**

### 4. Type of Ownership (Select One):

- Proprietorship
- Partnership
- Husband/Wife Ownership
- Corporation
- Limited Liability Company
- Other: _______________________

Describe the business activity at this location, stating the major product and/or services sold:

### 5. Opening Date:

<table>
<thead>
<tr>
<th>Will This Business Charge for Admissions?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Will This Business Sell Alcoholic Beverage?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**If YES, check all that apply:**

- Retail Beer
- Wholesale Liquor
- Caterer's License
- Wholesale Beer
- Liquor by the Drink
- Wine

### 6. Identify the owner(s), officers and/or partners. **Attach additional sheets if necessary.**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Social Security Number / FEIN</th>
<th>Owner-Individual Officer</th>
<th>Owner-Company Member</th>
<th>Partner</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

**Street Address. Do NOT use a P. O. Box**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

### 7. TOTAL APPLICATION FEE

$15.00

THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. The individual/owner, a partner or an officer of the corporation must sign application. The signatory must be listed in No. 5.

### 8.

<table>
<thead>
<tr>
<th>Signature of Owner, Partner or Corporate Officer (Do Not Print)</th>
<th>Date</th>
</tr>
</thead>
</table>
THE CITY OF KNOXVILLE, TENNESSEE

Department of Finance
Business Tax Division

OUT OF STATE CONTRACTOR’S BOND

Minimum Amount of Bond - $500.00

In accordance with section 67-5806 of the Business Tax Act, Title 67, Chapter 58 of the Tennessee Code Annotated.

KNOW ALL MEN BY THESE PRESENTS, that we, _________________________, City of ____________________________, State of ____________________________, a Principal, and ______________________________________, a Corporation, organized under the laws of the State of ____________________________, and being duly authorized and qualified to do the business of a bonding and indemnity company in the State of Tennessee, as surety, or ________________________________, City of ____________________________, State of ____________________________, and ________________________________, City of ____________________________, State of ____________________________, as sureties, heirs, administrators, executors, successors and assigns, are held and firmly bound unto the City of Knoxville, Tennessee in the penal sum of $________, firmly by these presents.

THE CONDITION OF THIS OBLIGATION AND OF THIS BOND IS AS FOLLOWS:

WHEREAS, the above bound principal desires to engage in the business of contracting in the City of Knoxville, Tennessee and has applied to said City of Knoxville, Tennessee for a GROSS RECEIPTS AND BUSINESS TAX LICENSE showing that said principal is qualified to do said contracting work, and

WHEREAS, as a condition to the issuance of such license it is the requirement of Title 67, Chapter 58, Section 67-5806 of the Tennessee Code Annotated of the State of Tennessee, that the said principal shall enter into a bond obligating the said principal to comply with the above Title. Chapter and Section of the Tennessee Code Annotated, guaranteeing payment of all taxes, penalties and interest as is set forth and required in Tennessee Code Annotated, Title 67, Chapter 58, as amended.

NOW, THEREFORE, if the said principal shall comply with the aforesaid statues and all provisions therein by purchasing a minimum business tax license and filing a gross receipts tax return reporting total gross contracts commenced and/or completed on each September 30th of each year or within fifteen (15) days of the completion date of any and all contracts, whichever date comes first, and paying the appropriate tax, penalties and interest which have accrued, this bond shall become void, but otherwise, it shall remain in full force and effect.

This bond is intended to secure compliance on the part of said principal, with Title 67, Chapter 58 of the Tennessee Code Annotated as well as any and all provisions of the same as amended in respect to the Business Tax responsibilities of said principal to the City of Knoxville, Tennessee, and in order to further define and limit the obligation and office of this bond, it is hereby further agreed between the parties hereto as follows:

(a) No action shall be brought on this bond unless said principal should default in the performance of his and/or her obligations and responsibilities as set forth in Title 67, Chapter 58 Tennessee Code Annotated.
City of Knoxville, Tennessee  
Out of State Contractor’s Bond  
Page Two

(b) This bond shall in no way affect the said principal’s civil responsibility to the person and/or persons for whom such contracting work is being done or has been performed, and shall not limit the City’s right to seek and enforce any and all legal remedies provided it in Title 67, Chapter 58, of the Tennessee Code Annotated.

(c) The term of this bond shall commence on the date written below and shall terminate on the last day of the current tax period for Class 4 businesses (Title 67, Chapter 58, of the Tennessee Code Annotated.) Thereafter, the term of this bond shall coincide with the taxing period for Class 4 businesses as established by the Tennessee State Legislature.

(d) This bond may be cancelled by giving thirty (30) days written notice of such intended cancellation by registered mail to the Business Tax Office, City of Knoxville, Tennessee, and P.O. BOX 1028, KNOXVILLE, TN 37901-1028.

Signed and sealed this the __________day of ____________, 20________.

_____________________________________
Principal

_____________________________________
Surety

_____________________________________
Surety

State of _________________
County of ________________
Sworn and subscribed to before me this _________ day of ______________, 20_____.

_________________________
Notary Public

My Commission Expires:__________________

NOTICE

Enter name and address of bonding company:

Name Bonding Company ___________________________    Bond Number ___________________________

_________________________
Contact Person

_________________________
Address, Street and Number

_________________________
City State Zip