



Application for Business License

Re: City of Oil City Ordinance No. 2748

Direct questions to the **Oil City Code Department** at 814-678-3003. Return completed applications to the Oil City Code Department on the first floor of City Hall, 21 Seneca St., Oil City, PA 16301.

Fee Schedule

Any person wishing to conduct business in the City of Oil City shall first make application for a Business License for each place of business within the City and pay a business license fee in accordance with the following schedule:

- Annual gross receipts of \$100,000 or more \$100.00
- Annual gross receipts between \$5,000 and \$100,000* \$ 50.00
- Annual gross receipts of \$5,000 or less* \$ 25.00
- New businesses (never had a license) \$ 25.00

**Any business claiming the lower fees will first have to submit to the City a copy of IRS Schedule C stating the gross receipts of the business for the previous year the business license is due, or any other form of schedule and/or schedule E that is also accepted by the IRS for federal income tax purposes.*

Please make checks payable to “City of Oil City”

Penalties

Any renewal that is not received by May 1st of the new tax year will result in a penalty that is equal to the cost of the original business license fee. If the person responsible for the business, trade, occupation, profession or merchandising operation shall fail, neglect or refuse to comply with any provisions, they shall, upon conviction before a District Magistrate having jurisdiction in the matter, be guilty of a summary offense and be fined an amount not more than three hundred dollars (\$300.00) plus costs of prosecution and, in default of payment thereof, be subject to imprisonment for a period of not more than ninety (90) days.

Businesses Required to Obtain a License

- Social and fraternal clubs
- Publishers of newspapers, magazines and periodicals
- Printers, lithographers, and processors
- Hotel/motel operators
- All eating or drinking establishments
- Warehousemen
- Upholsterers
- Morticians
- Radio stations
- Physicians, doctors, and all other health care providers and medical practices
- Lawyers
- Dentists
- Chemists
- Architects & Engineers
- Accountants
- Salesmen and Promoters
- Barber/beauty shops
- Dry cleaning establishments and laundromats
- Shoe repair shops
- Tailors/seamstresses
- Contractors of any kind
- Real estate brokers
- Persons or entities which lease real estate to others for commercial or residential purposes
- All other business, trades, occupations and professions in which offers any service(s) or product(s) to the general public



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APPLICANT INFORMATION

Name: _____ Email: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Alternate Phone: _____

BUSINESS INFORMATION

Business Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business email: _____

The business is: Incorporated A Partnership Sole Proprietorship

Business Description: _____

If business is conducted by an individual or a partnership under a fictitious name, list the name(s) of true owners and date of registration of business under Fictitious Names Act: _____

License Fee (*See reverse side for fee schedule*): _____

I hereby certify, under penalty of law, that the above information is true and correct to the best of my knowledge and belief and that I am authorized to represent the business listed herein to obtain a business license.

Applicant Signature

Date