



Revenue Department
City of Opelika
204 S 7TH Street
Opelika, Alabama 36801
(334)705-5160 or (334)705-5162
Fax: (334) 705-5163

TAXPAYER ID# _____ BUSINESS NAME _____

WORKSHEET FOR CITY OF OPELIKA, ALABAMA BUSINESS LICENSE RENEWAL APPLICATION FOR MS-MISCELLANEOUS

LICENSE DESCRIPTION (See below)	GROSS RECEIPTS	x	% TAX RATE	+	FLAT FEE	=	AMOUNT DUE
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____

DELINQUENT DATES:	PENALTY: 1-30 DAYS DELINQUENT 15%	_____
BUSINESS LICENSES:	FEBRUARY 15TH	OVER 30 DAYS 30%
	INTEREST: 1% OF TAX DUE PER MONTH LATE	_____
	TOTAL AMOUNT DUE FOR THIS WORKSHEET	_____

SCHEDULE RATE

DESCRIPTION	FLAT FEE	% TAX RATE of Annual Gross Receipts
Bail Bondsman Service	\$ 300	1/20 of 1% or 0.0005
Bus Line Local	\$ 100	
Care Facility	\$ 100	1/10 of 1% or 0.001
Carnival, Fair Circus	\$ 700	
Dance Hall	\$100	
Distribution Center	\$ 300	
Fortune Teller, Palmist, Phrenologist	\$1,000	
Gasoline Wholesale	\$ 200	
Gold & Silver Buyer	\$ 500	
Golf Course	\$100	
Movie Theatre	\$ 100	1/8 of 1% or 0.00125
Newspaper, Periodical, Book & Directory Publisher	\$ 150	
Office	\$ 100	
Photographer	\$ 100	1/20 of 1% or 0.0005
Preschool Centers & Schools	\$ 100	1/9 of 1% or 0.0011
Radio & Television Broadcasting	\$ 150	
Real Estate Sales Office	\$ 100	1/8 of 1% or 0.00125
Rental of Personal Property	\$100	
Warehouse & Storage	\$ 300	
Wood Yard	\$ 100	

Mail your application, worksheet(s) and check to: City of Opelika-Revenue; PO Box 390; Opelika AL 36803-0390



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WORKSHEET FOR CITY OF OPELIKA, ALABAMA BUSINESS LICENSE RENEWAL APPLICATION FOR MS-MISCELLANEOUS

LICENSE DESCRIPTION (See below)	Number of Items	x	Fee per item	+	FLAT FEE	=	AMOUNT DUE
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____
_____	_____	X	_____	+	_____	=	_____

DELINQUENT DATES: _____ **PENALTY: 1-30 DAYS DELINQUENT 15%** _____

BUSINESS LICENSES: **FEBRUARY 15TH** **OVER 30 DAYS 30%** _____

INTEREST: 1% OF TAX DUE PER MONTH LATE _____

TOTAL AMOUNT DUE FOR THIS WORKSHEET _____

SCHEDULE RATE

DESCRIPTION	FLAT FEE	Fee Per Item
Game Room	\$ 100	
Gasoline Retail	\$ 100	\$ 20 per Pump
Taxicab	\$ 100	\$ 30 per Cab
Hotels/Motels	\$ 100	\$ 3 per room or space
Mobile Home Park	\$ 100	\$ 3 per mobile home space
Pool Hall	\$100	\$ 50 per Table