		OCTOBER 20	23 NEW OTC'S			
BUSINESS NAME	LOCATION	CITY, STATE, ZIP	CONTACT	OWNERSHIP TYPE	START DATE	BUSINESS PHONE
AFFINITY PROPERTY MANAGEMENT	118 LAFAYETTE DRIVE	FAYETTEVILLE, GA 30214	SANDIE PULLEN	LIMITED LIABILITY CORPORATION	10/19/2023	470-610-6900
ALLIANCE CONTRACT SOLUTIONS	612 HWY 92 N	FAYETTEVILLE, GA 30214	WANDA SANDERS	LIMITED LIABILITY CORPORATION	10/30/2023	404-271-8308
AXEFOLDY LLC	101 KENWOOD RD STE 62	FAYETTEVILLE, GA 30214	DEVIN FOLDY	LIMITED LIABILITY CORPORATION	10/20/2023	678-675-9372
BTW SOLUTIONS	140 CADENCIA CT	FAYETTEVILLE, GA 30215	WILLIAM TRIMBLE	LIMITED LIABILITY CORPORATION	10/18/2023	615-669-2897
CK 138 LLC	2300 HWY 138 SW	FAYETTEVILLE, GA 30214	CHRISTOPHER POHOLEK	LIMITED LIABILITY CORPORATION	10/9/2023	770-859-1222
CLAYTON SIGNS INC	155 CARNES DRIVE	FAYETTEVILLE, GA 30214	TODD WILLIS	CORPORATION	10/18/2023	404-361-3800
EMNOTEK	780 BIRKDALE DR	FAYETTEVILLE, GA 30215	JAMES PAVONI	SOLE PROPRIETOR	10/17/2023	478-314-8644
HAIR I AM	369 PADGETT ROAD	SENOIA, GA 30276	KIMBERLY HEMMER	SOLE PROPRIETOR	10/18/2023	678-481-7140
KATY FARR STUDIOS	260 COUNTRY LANE RD	FAYETTEVILLE, GA 30214	MARY KATY FARR	SOLE PROPRIETOR	10/25/2023	678-644-8391
LAOCH SERVICES LLC	275 MARRON RD	FAYETTEVILLE, GA 30215	RICHARD CARMICHAEL	LIMITED LIABILITY CORPORATION	10/19/2023	678-221-7834
MCC LLC	175 ROXBORO CT	FAYETTEVILLE, GA 30215	KEYANNA MCCRAY	SOLE PROPRIETOR	10/30/2023	678-789-4618
MOCKOM SOLUTIONS LLC	109 WINDSAIL WAY	FAYETTEVILLE, GA 30215	ORNELL CHRISTIE	LIMITED LIABILITY CORPORATION	10/17/2023	404-610-7872
PERFORMANCE CONTRACTING GROUP, INC	140 ETOWAH TRACE	FAYETTEVILLE, GA 30214	PERFORMANCE CONTRACTING INC	CORPORATION	10/31/2023	913-888-8600
RJ MEDICAL SUPPLIES INC	1572 HWY 85 N STE 338	FAYETTEVILLE, GA 30214	JUDITH FAIRCLOUGH	CORPORATION	10/24/2023	404-808-5118
THE ICY SPOT	101 KENWOOD RD STE 40	FAYETTEVILLE, GA 30214	CLARENCE ADAMS	LIMITED LIABILITY CORPORATION	10/11/2023	470-517-6333
TOLINES CONTRACTING LLC	783 EBENEZER ROAD	FAYETTEVILLE, GA 30215	MATTHEW BUCKLEY	LIMITED LIABILITY CORPORATION	10/16/2023	770-231-3062
URBAN CHICKS	1572 HWY 85 STE 315	FAYETTEVILLE, GA 30214	KAWANNA ELLIS	LIMITED LIABILITY CORPORATION	10/16/2023	404-621-7307





FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

	KENEWAL DU	BI JANUARY 31 EACH YEAR		110	
Business Name AFFINITY PROPERTY MANAGEMENT	DBA (if different)	Phone 470610690	00	Home Occupation Commercial	
Physical Address 118 LAFAYETTE DRIVE	Unit/Suite	city FAYETTEVILLE	State GA	Zip Code 30214	
Mailing Address (if different) PO BOX 142892	Unit/Suite	city FAYETTEVILLE	State GA	Zip Code 30214	
Owner Name SANDIE PULLEN	Co Owner	Phone 404410290	00	E-Mail THEAFFINITYPM@GMAIL.COM	
Owner Address 118 LAFAYETTE DRIVE	Unit/Suite	City FAYETTEVILLE	State GA	Zip Code 30214	
Property Owner SANDIE PULLEN	Unit/Suite	city FAYETTEVILLE	State GA	Zip Code 30214	
Emergency Contact 1 ANDREA HEDGEBETH	Phone 4048036651	Emergency Contact 2 CAROL PARRISH		Phone 7703373188	
Do you hold a state license for you yes (Documentation Required)	ır occupation? √o	State Card # 380715	05312025	Issued To SANDIE PULLEN	
Form of Ownership Sole Proprietor Prop	rietorship	Business Type PROPERTY MANAGEMENT	NAICS 53	NAICS Tax Identification # 862393714	
	oration* nership-unknown type	# Employees 1	E-Verify	GA Sales Tax # N/A	
Non Profit 501 c 3* Disal *Documentation is required	oled Veteran*	Annual Tax Schedule 0-3 \$75.00 16-25 \$500.00 4-6 \$150.00 26-50 \$750.00	check	pleted Application & Payment: c, cash, or credit card to: wall Avenue West, Suite 101	
I swear under penalty of law that the above infor correct. I understand that this is a tax certificate. comply with any zoning, Fire Marshal, Health, or	I must separately	7-10 \$250.00 51-100 \$1,000.00 11-15 \$375.00 101+ \$10.00 each Maximum Tax \$1,500.00	Fayetteville, GA 30214 Make Checks Payable to Fayette County		
understand that information I provide herein (or my refusal to provide required information) will be shared with the Georgia Department of Revenue.		Signature of Business Owner Augustia		Date 09/22/2023	
Finance Department U	se:	Plann	ing & Zoning	Use:	
CONTRACTOR AND CONTRACTOR OF THE PARTY OF TH		District Land Lot 219		Zoning District	
Finance Signature Tracey Taylor 10/1	X credit/Debit Card X BOTSS Reporting 9/2023	Planning Zoning Signature		Date 26, 203	

SEORSIAGO/

e-Services





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< FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-011-424-200

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

19-Oct-2023

Your confirmation number is 0-011-424-200.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

Printable View
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Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials



FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name	DBA (if different)		Phone 404 074 0000			Home Occupation
Alliance Contract Solutions, LLC		404-271-83		308		Commercial
Physical Address 612 Highway 92 N	Unit/Suite	city Fayettevi	lle	State Ga	Zip Code 30214	
Mailing Address (if different)	Unit/Suite	City		State	Zip Code	e
		-				
Owner Name Co Owner Wanda Sanders n/a		Phone 404-271-8308		8	E-Mail michellewand@msn.com	
Owner Address 612 Highway 92 N	Unit/Suite	city Fayettevi	lle	State Ga	Zip Code 30214	
	lu sus su	lau.		les i		
Property Owner Wanda Sanders	Unit/Suite	City Fayettevi	lle	State Ga	Zip Code 30214	
Emergency Contact 1 John Glover	Phone 678-779-0769	Emergency Contact 2 Asia Favorite			Phone 404-6	67-8653
Po you hold a state license for your fee (Documentation Required)	our occupation?	State Card # Expira		Expiration	Issued 1	Го
Form of Ownershi	p oprietorship			NAICS 5416 \ 2		ntification # 60295
	rporation* rtnership-unknown type	# Employees		E-Verify	A Sale	s Tax #
Exemptions		Annual T	ax Schedule	Bring Com	leted Apr	dication & Payment:
	sabled Veteran*	0-3 \$75.00	16-25 \$500.00			credit card to:
*Documentation is requi	red	4-6 \$150.00	26-50 \$750.00	140 Stone	wall Aven	ue West, Suite 101
I swear under penalty of law that the above inf	ormation is true and	7-10 \$250.00	51-100 \$1,000.00	Fa	yetteville	, GA 30214
correct. I understand that this is a tax certificat	e. I must separately	11-15 \$375.00 101+ \$10.00 each Make Che		Make Chec	ks Payabl	e to Fayette County
comply with any zoning, Fire Marshal, Health,	or other rules. I	Maximum	Tax \$1,500.00			
understand that information I provide herein (o	r my refusal to	Signature of	Business Owner	r	Date	
provide required information) will be shared wi	th the Georgia	1.	1 10	,	12	100 1000
Department of Revenue.		Jum	M/Jan	June 1		102 12023
Finance Department	Use:		Plann	ing & Zoning	Use:	
X New Update Licens	e# 686	t 5 Land Lot 164		4	Zoning D	R-40
Cash Check # 1 Money Orde	r X Credit/Debit Card	Allowable 1	or Business Use	Not	t Allowable	for Business Use
Finance Signature Date	× BOTS\$ Reporting 0/30/2023	Planning & Z	oning Signature		Date /0 /	2/2023

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Help

e-Services





< FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-082-717-128

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

30-Oct-2023

Your confirmation number is 0-082-717-128.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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OK.

Print Confirmation

Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials

084/186



OCCUPATION TAX CERTIFICATE APPLICATION

FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Emergency Contact 1 Shan non Foldy Phone Sole Proprietors General Partnership Partnership-unknown type Exemptions Non Profit 501 c 3' Poor when the the above information is true and ameet. I understand that this is a tax certificate. I must separately omply with any zoning, Fire Marshal, Health, or other rules. I derstand that information I provide herein (or my refusal to wide required information) will be shared with the Georgia partnersh (Disabled Vetera) Sole Proprietor Form of Ownership Partnership Partnership-unknown type Exemptions Non Profit 501 c 3' Disabled Veteran' *Documentation is required *Tax Identification # Sole Proprietor #Employees E-Verify # GA Sales Tax # 13 990 86 - 3 0 3 3 3 8 2 #Employees E-Verify # GA Sales Tax # 14 6 - 30 3 3 3 8 2 #Employees Fing Completed Application & Payment: check, cash, or credit card to: 140 Stonewall Avenue West, Suite 101 Fayetteville, GA 30214 Make Checks Payable to Fayette County Madmum Tax \$1,500.00 Signature of Business Owner Date O7//8/23 Planning & Zoning Use: XNew Jpdate Money Order According Tax Identification # Expiration Issued To Provide Tax Identification # Expiration State Card # Emergency Contact 2 Deniise Support Partnership Partnership Partnership Partnership Partnership Recurrent # Employees Business Type # Employees Business Type # Employees Business Type Annual Tax Schedule 0-3 \$75.00 16-25 \$500.00 140 Stonewall Avenue West, Suite 101 Fayetteville, GA 30214 Make Checks Payable to Fayette County Madmum Tax \$1,500.00 Signature of Business Owner Date O7//8/23 Planning & Zoning Use: XNew Jpdate Money Order According District C-H Money Order Money			KENEWAL	DUE BY JANUARY	31 EACH YEAR		
Physical Address Orl Kansol Rd G2 City Further, City Further, City		,				-675-937	Hame Occupation Commercial
Mailing Address (if different) 25 Hillsp PL Unit/Suite City Phone 678-675-9372 E-Mail In fee black be a 2 21p Code 30263	Physical Address		Unit/Suite	Class			zip Code 30214
Owner Address 2 S	Mailing Address (if differen		Unit/Suite				Zip Code 3 0 2 6 3
Owner Address 2 Hillipp L Unit/Suite City Newarn 5tate 2 Jp Code 3 0 2 6 3 Property Owner William Middon Unit/Suite 62 City Fayeffeville 5tate 6 A Zip Code 3 0 2 6 3 Property Owner William Middon Emergency Contact 2 State 6 A Zip Code 3 0 2 1 4 5 5 6 6 A No. No. Follow 6 78 - 550 - 66 4 Denise 5 app Phone 9 12 - 2 53 - 887 1 D			Co Owner		Phone	75-9372	E-Mail to 0 b back be
Emergency Contact 1 Shannon Colog Phone State Card # Expiration Issued To Expiration Issued To Form of Ownership Sole Proprietor Corporation Corporation General Partnership Fartnership Sole Proprietor Corporation Partnership-unknown type Exemptions Non Profit 501 c 3' Disabled Veteran' *Documentation is required *To \$75.00 16-25 \$500.00 4-6 \$150.00 26-50 \$750.00 7-10 \$250.00 51-100 \$1,000.00 Fayetteville, GA 30214 Make Checks Payable to Fayette County Madmum Tax \$1,500.00 Signature of Business Owner Date Date District Solicy So	Owner Address	U	Init/Suite	City Newn		State	Zip Code
Emergency Contact 1 Shannol State license for your occupation? Ves (Documentation Required) Form of Ownership Sole Proprietorship Corporation* General Partnership Exemptions Non Profit 501 c 3* **Documentation is required **Pocumentation is required **Sole Proprietorship Exemptions Non Profit 501 c 3* **Documentation is required **Pocumentation is true and the above information is true and the important is a tax certificate. I must separately only with any zoning, Fire Marshal, Health, or other rules. I derstand that information I provide herein (or my refusal to book required information) will be shared with the Georgia partment of Revenue. **Finance Department Use: **Planning & Zoning Use: **Planning & Zoning District **C-H* **Nowable for Business Use **Not Allowable for Business Use **Not Allowable for Business Use **Dotate **Pocumentation is provide parative in provide provided **Pocumentation is true and the parative in provided herein (or my refusal to book parative) **Pocumentation is true and the parative is a parative in provide herein (or my refusal to book parative) **Pocumentation is true and the parative is a parative in provide herein (or my refusal to book parative) **Pocumentation is required information is provided herein (or my refusal to book parative) **Pocumentation is true and the parative is a parative in provide herein (or my refusal to book parative) **Pocumentation is required in provide herein (or my refusal to book parative) **Pocumentation is required in provide herein (or my refusal to book parative)	Dranarty Owner	U	-	city Fayet	teville		zip Code 30214
Form of Ownership Sole Proprietor Limited Liability Corporation General Partnership Non Profit 501 c 3' *Documentation Is required Swear under penalty of law that the above information is true and arrect. I understand that this is a tax certificate. I must separately omply with any zoning, Fire Marshal, Health, or other rules. I derstand that information I provide herein (or my refusal to wide required information) will be shared with the Georgia partment of Revenue. Signature of Revenue. State Card # Expiration Issued to Expiration I provide herein (or my refusal to wide required information) will be shared with the Georgia partment of Revenue. State Card # Expiration Issued to Expiration I provide herein (or my refusal to wide required information) will be shared with the Georgia partment of Revenue. State Card # Business Type NAICS 13 990 86 - 3 0 3 3 3 8 2 E-Verify # GA Sales Tax # # 66 3 Sales Tax # # 66 5 \$50.00 Annual Tax Schedule 0-3 \$75.00 16-25 \$500.00 4-6 \$150.00 26-50 \$750.00 7-10 \$250.00 51-100 \$1,000.00 Fayetteville, GA 30214 Make Checks Payable to Fayette County Maximum Tax \$1,500.00 Signature of Business Owner Date Date Botts Reporting Planning & Zoning Signature Date		. let				ρ	Phone 912-253-8871
Form of Ownership Sole Proprietor Imited Liability Corporation' General Partnership Non Profit 501 c 3' Non Profit 501 c 3' Pocumentation is required Sowear under penalty of law that the above information is true and arrect. I understand that this is a tax certificate. I must separately amply with any zoning, Fire Marshal, Health, or other rules. I derstand that information I provide herein (or my refusal to wide required information) will be shared with the Georgia Partnership Business Type Rec Yent Yon Tax Identification # 86 - 3 0 3 3 3 8 2 Bring Completed Application & Payment: check, cash, or credit card to: 140 Stonewall Avenue West, Suite 101 Fayetteville, GA 30214 Make Checks Payable to Fayette County Makimum Tax \$1,500.00 Signature of Business Owner Date District Signature of Business Owner Date District C - H Money Order Money Order Application # 86 - 3 0 3 3 3 8 2 Bring Completed Application & Payment: check, cash, or credit card to: 140 Stonewall Avenue West, Suite 101 Fayetteville, GA 30214 Make Checks Payable to Fayette County Make Checks Payable to Fayette County Date District Signature of Business Owner Date District C - H Money Order Application # 86 - 3 0 3 3 3 8 2 Bring Completed Application & Payment: check, cash, or credit card to: 140 Stonewall Avenue West, Suite 101 Fayetteville, GA 30214 Make Checks Payable to Fayette County Make Checks Payable to Fayette County Date Date District 5 1 2 9 Not Allowable for Business Use Not Allowable for Business Use Not Allowable for Business Use	Do you hold a state licens	e for your o		State Card #		Expiration	Issued To
Limited Liability Corporation' General Partnership Exemptions Non Profit 501 c 3' Non Profit 501 c 3' Disabled Veteran' *Occumentation is required Swear under penalty of law that the above information is true and or meet. I understand that this is a tax certificate. I must separately or may with any zoning, Fire Marshal, Health, or other rules. I derstand that information I provide herein (or my refusal to ovide required information) will be shared with the Georgia partment of Revenue. Finance Department Use: Corporation' Partnership-unknown type	Form of Ow	nership	orship				
Annual Tax Schedule Non Profit 501 c 3* Disabled Veteran* *Documentation is required *Documentation is require	Limited Liability Corporation*			# Employees		E-Verify #	
Finance Department Use: Finance Department Us	Exempt		Veteran*			check	, cash, or credit card to:
meret. I diderstand that this is a tax certificate. I must separately period of the provide herein (or my refusal to derstand that information I provide herein (or my refusal to ovide required information) will be shared with the Georgia partment of Revenue. Signature of Business Owner			on is true and	1		Fa	yetteville, GA 30214
derstand that information I provide herein (or my refusal to ovide required information) will be shared with the Georgia partment of Revenue. Finance Department Use: Planning & Zoning Use:					857	Make Checl	s Payable to Fayette County
Finance Department Use: Planning & Zoning Use:	nderstand that information I provide h	erein (or my re	efusal to	Signature of B	Justiness Owner		/ / /
X New Jpdate License # 105680 District Land Lot Zoning District C-H	Finance Departs	ment lise:			Plannii	na & Zonina	Use:
Cash Check # Money Order Credit/Debit Card Howable for Business Use Not Allowable for Business Use ance Signature Date BOTSS Reporting Planning & Zoning Signature Date		License #			and Lot		Zoning District
	Cash Check # Mone	y Order XC	redit/Debit Card			Not.	
	13111			Planning & Zon	ing signature		

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Help

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FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-921-323-976

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

25-Oct-2023

Your confirmation number is 0-921-323-976.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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Department of Revenue

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Appeal to the GA Tax Tribunal

Video Tutorials



FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

	-				
Business Name BTW SOLUTIONS	DBA (if different)		Phone 615-669.	-289-	Home Occupation Commercial
Physical Address	Unit/Suite	City		State	Zip Code
140 CADENCIA CT		FAYette	W/11e	GA	30215
Mailing Address (if different)	Unit/Suite	City		State	Zip Code
Owner Name William Jithimble	Co Owner DARLEI/ B) L STOW	Phone 615-669.	-2891	E-Mail BTWSQLd7 WSCO;CC
Owner Address 140 CANENCIA J	Unit/Suite	City FageLt	evi'lle	State Ol A	Zip Code 302/5
Property Owner	Unit/Suite	City		State	Zip Code
William J. TRimble		FAJet	teville	GA.	30218
Emergency Contact 1					
Emergency Contact 1 678-787-/345	Phone 678787-154		Contact 2	V	Phone 7:70-833-5040
Do you hold a state license for yo Yes (Documentation Required)		State Card #		Expiration	Issued To
Form of Ownership		Business Typ	eNEMT	NAICS	Tax Identification #
Sole Proprietor Pro	prietorship	MONEMO	-	561110	93-1499940
	ooration* :nership-unknown type	# Employees		E-Verify #	GA Sales Tax #
Exemptions		Annual T	ax Schedule	Bring Com	leted Application & Payment:
Non Profit 501 c 3* Disa	abled Veteran*	0-3 \$75.00	16-25 \$500.00	check	c, cash, or credit card to:
*Documentation is require	ed	4-6 \$150.00	26-50 \$750.00	140 Stone	wall Avenue West, Suite 101
I swear under penalty of law that the above info		7-10 \$250.00	51-100 \$1,000.00		yetteville, GA 30214
correct. I understand that this is a tax certificate			101+ \$10.00 each	Make Chec	ks Payable to Fayette County
comply with any zoning, Fire Marshal, Health, our understand that information I provide herein (or			Tax \$1,500.00 Business Owne		Date
provide required information) will be shared with		/:///	A STATE OF THE	6	
Department of Revenue.	1 the coorgin	Millen	1 nont		10-12-23
Finance Department (Jse:	V	Plann	ing & Zoning	Use:
X New Update License 10	* # 05679	District	Land Lot 5		Zoning District PUD-PRD
Cash Check # Money Order	X Credit/Debit Card	Lattowable	for Business Use	No	t Allowable for Business Use
Finance Signature Date	X BOTSS Reporting	Planning & Z	oning Signature		Date 10 12 2023

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e-Services





Help

< FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-439-275-976

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

18-Oct-2023

Your confirmation number is 0-439-275-976.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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105679

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Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials





FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name CK 138, LLC	UBA (if different)		Phone 770859122	22	Hame Occupation Commercial	
Physical Address 2300 HWY 138 SW	Unit/Suite	ದರು Fayettevi	Gty Fayetteville		Zip Code 30214	
Mailing Address (If different) 300 Galleria Parkway SE	Unit/Suite 200	city Atlanta		State GA	Zip Code 30339	
Owner Name Christopher Poholek	Coowner Gordon Buch	ımiller Jr.	Phone 770859120	10	E-Mall Chris-Potrolok@g-Zdriesskiani.com	
owner Address 300 Galleria Parkway SE	Unit/Suite 200	city Atlanta		State GA	Zip Code 30339	
Property Owner	Unit/Suite	City		State	Zip Code	
Emergency Contact 1 Chris Poholek	Phone 770-859-127	Emergency Contact 2 9-1276 Kelly Greene			Phone 770-859-1222	
Do you hold a state license for you held a state license for you held a state license for you	ur occupation?	,		Expiration	Issued To	
Form of Ownership) prietorship	TA 11 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A		MATCS 531130	Tax Identification # 87 - /592363	
	poration* thenhip-unknown type	# Employee:	3	E-Verify #	GA Sales Tax # 308 - 897546	
Exemptions		Annual "	fax Schedule	Bring Com	empleted Application & Payment:	
Non Prefit 501 c 3*	abled Veteran*	0-3 \$75.00	16-25 \$500.00	chec	k, cash, or credit card to:	
*Occumentation is regula	ed	4-6 \$150.00	26-50 \$750.00	140 Ston	ewall Avenue West, Suite 101	
I swear under penalty of law that the above info correct, I understand that this is a tax certification correly with any zening, Fire Marshal, Health, 4	e. I must separately	11-15 \$375.00	51-100 \$1,000.00 101+ \$10.00 each Tax \$1,500.00		ayetteville, GA 30214 cles Payable to Fayette County	
unconstand that Information I provide herein (o provide required information) was be shared wit Department of Revenue.	ट मार्थ ग्वरिक्श देव	Signature of	Business Owner	r.	9/21/23	
Finance Department	Uset	REPORTED IN	Plann	ning & Zonin	g Use:	
Licens Licens		District Land Lot 19		ş	Zoning District.	
Cash Check Money Orde	X Crediv Det & Card	Monaple	for Business Use	N	ot Allowable for Business Use	
Finance Signature Date 10	X BOTSS Reporting	Plenning &	coning Stonatur	4.	Day 22, 2003	

SEORSIAGOV

Help

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< FAYETTE COUNTY

Confirmation **Submission Information** c056faye Logon Submitted Status Confirmation Number 0-715-940-296 **FAYETTE COUNTY** Taxpayer Name STI 20229623414 Submission Title **BOTSS Data Submission** Submitted 09-Oct-2023 Your confirmation number is 0-715-940-296. Your request has been submitted and will be processed in the order that it was received. If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711). Printable View OK 05668

Print Confirmation

Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials





FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

	RENEWAL DUE	BY JANUARY	SI EACH YEAR			
Business Name	DBA (if different)	Phone			Home Occupation	
Clayton Signs, Inc.			404.361.380	00	Commercial	
Physical Address	Unit/Suite	City		State	Zip Code	
155 Carnes Drive		Fayettevil	le	GA	30214	
Mailing Address (if different)	Unit/Suite	City		State	Zip Code	
5198 North Lake Drive		Lake City		GA	30260	
	11					
Owner Name	Co Owner		Phone		E-Mail	
Todd Willis		-14	404.361.380	00	kaylinwillis@claytonsigns.com	
Owner Address	Unit/Suite	City		State	Zip Code	
5198 North Lake Drive		Lake City		GA	30260	
	II.					
Property Owner	Unit/Suite	City		State	Zip Code	
Todd Willis		Fayettevil	le	GA	30260	
Emergency Contact 1	Phone		y Contact 2		Phone	
Todd Willis	678.409.6358	Kaylin Willis			678.967.9065	
Do you hold a state license	for your occupation?	State Card # Expiration		Expiration	Issued To	
Yes (Documentation Required	√ No					
Form of Own	Proprietorship	Business Type NAICS Storage warehouse 339950		NAICS 339950	Tax Identification # 58-1075193	
Limited Liability Corporation*	✓ Corporation*	# Employees		E-Verify # GA Sales Tax #		
General Partnership	Partnership-unknown type	0		776733 20000272095		
Exemption	ons	Annual 1	Annual Tax Schedule Bring Completed Ap			
Non Profit 501 c 3*	Disabled Veteran*	0-3 \$75.00	16-25 \$500.00	check	r, cash, or credit card to:	
*Documentation i	s required	4-6 \$150.00	26-50 \$750.00	140 Stone	wall Avenue West, Suite 101	
I swear under penalty of law that the ab	ove information is true and	7-10 \$250.00	51-100 \$1,000.00	Fa	yetteville, GA 30214	
correct. I understand that this is a tax of		11-15 \$375.00	101+ \$10.00 each	Make Chec	ks Payable to Fayette County	
comply with any zoning, Fire Marshal, h		Maximum	Tax \$1,500.00			
understand that information I provide he	erein (or my refusal to	Signature of	Business Owner		Date	
provide required information) will be sha	ared with the Georgia	bhoT	Willis Date: 2023.0		08.24.23	
Department of Revenue.		1000	14:11:14 -04	'00'		
Einango Donart	ment lies		Plann	ing & Zoning	ı Use:	
Finance Department Use:		District	Land Lot		Zoning District	
X New Update	105677	District Land Lot 217			M-)	
Cash Check # Mon	ey Order X Credit/Debit Card	Allowable	for Business Use	No	t Allowable for Business Use	
Finance Signature Tracey Taylor	Date X BOTSS Reporting 10/18/2023	Planning &	Soning Signature	G	Date Ac. 28, 2023	
				1		

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Help

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< FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

1-004-032-456

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

18-Oct-2023

Your confirmation number is 1-004-032-456.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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OK.

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Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials



FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name Emnotek	DBA (if different)		Phone 478314864	4	Home Occupation Commercial
Physical Address 780 Birkdale Dr	Unit/Suite	city Fayettevi	lle	State GA	Zip Code 30215
Mailing Address (if different) 312 Crosstown Rd	Unit/Suite 220	city Peachtre	e City	State GA	Zip Code 30269
owner Name James Pavoni	Co Owner	Phone 478719736		2	E-Mail jamespavoni@gmail.com
owner Address 780 Birkdale Dr	Unit/Suite	c ity Fayettevi	lle	State GA	Zip Code 30215
Property Owner James Pavoni	Unit/Suite	city Fayettevi	lle	State GA	Zip Code 30215
Emergency Contact 1	Phone	Emergency	Contact 2		Phone
Do you hold a state license for you yes (Documentation Required)	ur occupation?	State Card #		Expiration	Issued To
Form of Ownership Sole Proprietor Prop	prietorship			NAICS 4541 TU	Tax Identification # 201369018
\square	oration* nership-unknown type	# Employees		E-Verify	GA Sales Tax # 301-715852
Exemptions		Annual T	ax Schedule	Bring Comp	oleted Application & Payment:
Non Profit 501 c 3*	bled Veteran*	0-3 \$75.00	16-25 \$500.00	check	, cash, or credit card to:
*Documentation is require	d 🔎	4-6 \$150.00	26-50 \$750.00	140 Stone	wall Avenue West, Suite 101
I swear under penalty of law that the above info	rmation is true and	7-10 \$250.00	51-100 \$1,000.00	Fa	yetteville, GA 30214
correct. I understand that this is a tax certificate	. I must separately	11-15 \$375.00 101+ \$10.00 each Make Che		Make Chec	ks Payable to Fayette County
comply with any zoning, Fire Marshal, Health, o	other rules. I	Maximum	Tax \$1,500.00		
understand that information I provide herein (or	my refusal to	Signature of	Business Owner	r	Date
provide required information) will be shared with	the Georgia	Jam	nes Pavoni		9/28/23
Department of Revenue.	01 HV=3 E 1=2 S31	TEILE TO THE			
Finance Department U	se:		Plann	ing & Zoning	Use:
X New Update License	# 5676	District	Land Lot		Zoning District
Cash Check # Money Order	X Credit/Debit Card	Allowable	or Business Use	Not	t Allowable for Business Use
Finance Signature Taylor Date	X BOTSS Reporting 0/17/2023	Planning & Z	oning Signature		Date

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e-Services





< FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

2-146-558-408

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

17-Oct-2023

Your confirmation number is 2-146-558-408.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

Printable View

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Print Confirmation

Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials



FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

	7					
Business Name	DBA (if different)		Phone		Home Occupation	
HAIR I Am		,	678481	7140	Commercial	
Physical Address	Unit/Suite	City		State	Zip Code	
369 PADGETT ROAD	_	Denou)	GA	30276	
Mailing Address (if different)	Unit/Suite	City		State	Zip Code	
			W. S.			
Owner Name	Co Owner		Phone		E-Mail	
Kimberry Hemmer			678481-	7140	Khemm66@GMANCO	
Owner Address	Unit/Suite	City		State	Zip Code	
369 PADGEH ROAD		Senoi	P.	GA	30276	
		00.00	1 *		1000.10	
Property Owner	Unit/Suite	City		State	Zip Code	
Kevin And Kimberly	ome, suice	Senoi	n	GA	30276	
Hemmer		1 00 101	n	01.	1000 10	
Emergency Contact 1	Phone	Emergence	y Contact 2		Phone	
Kevin Hemmer	678481714		a Hommo		70-310-6542	
Do you hold a state license for you		1 0,00,0			Issued To Kimberry	
Yes (Documentation Required)	No	State Card #		Expiration 3/24	(4)	
	_	W 054673			Ann Jurgens Hemm	
Form of Ownership Sole Proprietor	prietorship	Business Typ		NAICS Sia	Tax Identification # 50486 9895	
Limited Liability Corporation* Corp	oration*	# Employees	Ŀ	E-Verify	A Sales Tax #	
General Partnership Part	nership-unknown type	8		2		
Exemptions		Annual T	ax Schedule	Bring Completed Application & Payment:		
Non Profit 501 c 3* Disa	bled Veteran*	0-3 \$75.00	16-25 \$500.00	check	, cash, or credit card to:	
*Documentation is require		4-6 \$150.00	26-50 \$750.00	140 Stone	wall Avenue West, Suite 101	
I swear under penalty of law that the above info	mation is true and	7-10 \$250.00	51-100 \$1,000.00	Fa	yetteville, GA 30214	
correct. I understand that this is a tax certificate.		11-15 \$375.00	101+ \$10.00 each	Make Chec	ks Payable to Fayette County	
comply with any zoning, Fire Marshal, Health, or	other rules. I	Maximum	Tax \$1,500.00			
understand that information I provide herein (or	my refusal to	Signature of	Business Owner		Date	
provide required information) will be shared with	the Georgia	11	3.4		19/1102	
Department of Revenue.	_	4run	a Hemme	γ	111123	
				THE REAL PROPERTY.		
Finance Department U	CONTRACTOR OF THE PARTY OF THE		EVIS TESTINOS	ing & Zoning	CONTRACTOR STATE OF THE STATE OF	
Viplate License 105		नम	Land Lot		Zoning District	
Cash Check # Money Order	X Credit/Debit Card	Wowable f	or Business Use	Not	Allowable for Business Use	
Finance Signature Taylor Date	X BOTSS Reporting 0/18/2023	Planning & Z	oning Signature		Date 5:0 15,2023	

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FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

1-421-922-760

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

18-Oct-2023

Your confirmation number is 1-421-922-760.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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Department of Revenue

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Appeal to the GA Tax Tribuna

Video Tutorials



FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name	DBA (if different)		Phone		Home Occupation
Kary Farr Studios			678 644	8391	Commercial
Physical Address	Unit/Suite	City	4	State	Zip Code
260 Country Lane Ad		Fayer	reville	(- A	30214
Mailing Address (if different)	Unit/Suite	City		State	Zip Code
Owner Name	Co Owner		Phone	. 6	E-Mail
Mary Kate Fart			678-64	× 8391	Kutyfarrstudius@
Owner Address	Unit/Suite	City	x	State	Zip Code
260 Country Lane Rd		Trojete	ville	6/4	302 i4
,	716-2-				
Property Owner	Unit/Suite	City	ď	State	Zip Code
Mary hore Fair		Fayett	eville	GA	30214
	-				
Emergency Contact 1	Phone		y Contact 2		Phone
Sarah White	904 562 986	Bonita	Dorsey	т	770 460 9445
Do you hold a state license for y		State Card #		Expiration	Issued To
Yes (Documentation Required)	V 10				
Form of Ownershi	p	Business Type		NAICS	Tax Identification #
	oprietorship	Artist		711510	55# 455-15-2403
H	rporation*	# Employees	•	E-Verify #	GA Sales Tax #
General Partnership Pa	rtnership-unknown type				
Exemptions		Annual 1	ax Schedule	Bring Comp	pleted Application & Payment:
Non Profit 501 c 3*	sabled Veteran*	0-3 \$75.00	16-25 \$500.00	check	c, cash, or credit card to:
*Documentation is requi	red	4-6 \$150.00	26-50 \$750.00	140 Stone	wall Avenue West, Suite 101
I swear under penalty of law that the above in	formation is true and	7-10 \$250.00	51-100 \$1,000.00	Fa	yetteville, GA 30214
correct. I understand that this is a tax certifica	te. I must separately	11-15 \$375.00	101+ \$10,00 each	Make Chec	cks Payable to Fayette County
comply with any zoning, Fire Marshal, Health,	or other rules. I		Tax \$1,500.00	L	
understand that information I provide herein (or my refusal to	Signature of	Business Owner	r	Date
provide required information) will be shared wi	th the Georgia	M	YAD		10/6/2023
Department of Revenue.		May)	race 1/4	N	10/6/2023
Finance Department	Use:		Plann	ing & Zoning	J Use:
X New Update Licen	se # 05678	District.	Land Lot Z3	3	Zoning District R - ZO
Cash Check# Money Orde	x Credit/Debit Card	llowable	for Business Use	No	t Allowable for Business Use
Finance Signature Tracey Taylor 1	X BOTSS Reporting 0/25/2023	Planning & Z	Coning Signature		Date 10/0/2023

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< FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-148-343-240

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

25-Oct-2023

Your confirmation number is 0-148-343-240.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name LACCH SERVICES LLC	DBA (if different)	1	Phone 678, 221	.7834	Home Occupation Commercial
Physical Address 275 MARRON RD	Unit/Suite	City FAYETT	City STEVILLE		Zip Code 3021\$
Mailing Address (If different)	Unit/Suite	City		State	Zip Code
Owner Name RICHARD CARMICHABL	Co Owner		Phone 678 . 221.	2834	BEWENKHVER & ANDER
Owner Address 275 MARRON 20	Unit/Suite	City FAYECT	ENTRE	State GA	Zip Code 5.45
Property Owner [ZICHARD CARAICHARL	Unit/Suite	City	MITE	State GA	Zip Code
Emergency Contact 1 RENSE CARMICHABL	Phone 615 504 82		/ Contact 2		Phone
Do you hold a state license for you yes (Documentation Required)		State Card #		Expiration	Issued To
Form of Ownership Sole Proprietor	prietorship	Business Typ	_	NAICS D	Tax Identification # 2 84-4950842
	poration* nership-unknown type	# Employees	* 1	E-Verify (F)	GA Sales Tax #
Non Profit 501 c 3* *Documentation Is require	bled Veteran*		16-25 \$500.00 26-50 \$750.00	check	pleted Application & Payment: c, cash, or credit card to: wall Avenue West, Suite 101
I swear under penalty of law that the above info correct. I understand that this is a tax certificate comply with any zoning, Fire Marshal, Health, or	. I must separately	11-15 \$375.00	51-100 \$1,000.00 101+ \$10.00 each Tax \$1,500.00		yetteville, GA 30214 ks Payable to Fayette County
understand that information I provide herein (or provide required information) will be shared with Department of Revenue.	Signature of	Bueiness Owner	m	Date 13 007 2023	
Finance Department U	se:	0	Rlann	ing & Zoning	9 3 7 4 4 5 5 5 5
New Update License 10	5681	District	Land Lot		Zoning District
Cash Check# Money Order	A CONTRACTOR OF THE PARTY OF TH		or Business Use		t Allowable for Business Use
Finance Signature Date Date 10/	X BOTSS Reporting	Planning & Z	oning Signature		Date

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FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-727-962-056

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

19-Oct-2023

Your confirmation number is 0-727-962-056.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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Department of Revenue

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Appeal to the GA Tax Tribunal

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FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

	[== a (10 1100	Phone		Home Occupation	
Business Name	DBA (if different)	(6) 789-1	1618	Commercial	
Physical Address	Unit/Suite	City	State	Zip Code	
175 Roxboro Ct	7	FaircHeville	MA	30215	
Mailing Address (if different)	Unit/Suite	City	State	Zip Code	
		[-·		racii 9.3	
Owner Name Keyan na McChary Owner Address	Co Owner Wy taria	10 (Vary (6)789-4	1418	E-Mail LFORD a D'South	
Owner Address	Unit/Suite	City	State	Zip Code	
75 Roxbord Ct		Fayetenlle	4K)	30215	
	T			Zip Code	
Property Owner	Unit/Suite	City	State	Zip Code	
The factor of the Charles					
Emergency Contact 1	Phone	Emergency Contact 2		Phone	
<u>Do you hold a state license for y</u>	our occupation?	State Card #	Expiration	Issued To	
Yes (Documentation Required)	No				
Form of Ownershi	ip	Business Type Hore Office		Tax Identification #	
Sole Proprietor	roprietorship	Kreenis Seeliat		760-43-6992	
the state of the s	orporation*	# Employees	E-Verify #	GA Sales Tax # 10	
General Partnership	artnership-unknown type			Later d Ameliantian P. Daymonts	
Exemptions		Annual Tax Schedule		pleted Application & Payment: k, cash, or credit card to:	
	isabled Veteran*	0-3 \$75.00 16-25 \$500.00	1	ewall Avenue West, Suite 101	
*Documentation is requ		4-6 \$150.00 26-50 \$750.00		ayetteville, GA 30214	
I swear under penalty of law that the above in		7-10 \$250.00 51-100 \$1,000.00 11-15 \$375.00 101+ \$10.00 each	1	cks Payable to Fayette County	
correct. I understand that this is a tax certifica		Maximum Tax \$1,500 00	Plake Cite	s ayable to layette county	
comply with any zoning, Fire Marshal, Health, understand that information I provide herein (Signature of Business Owner	r	Date	
provide required information) will be shared w				1	
Department of Revenue.	nur the deorgia	Shirt of		9/24/23	
Finance Department	· Ilse	Plan	ning & Zonin	g Use:	
Licen	AND THE PARTY OF THE PARTY OF THE PARTY.	District Land Lot		Zoning District	
X New Update 10	05688				
Cash Check # Money Ord		Ulowable for Business Use		ot Allowable for Business Use	
Finance Signature Parter Parter	x BOTSS Reporting	Planning Zoning Signatur	e	Date 26, 2023	

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< FAYETTE COUNTY

Confirmation

Submission Information

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Status

Submitted

Confirmation Number

1-204-955-592

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

30-Oct-2023

Your confirmation number is 1-204-955-592.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

RENEWAL DUE BY JANUARY 31 EACH YEAR						
Moctom Solutions 11c	DBA (if different)		Phone 404.618.	7872	Home Occupation Commercial	
Physical Address	Unit/Suite	city Faget	eJille	State 4	Zip Code	
Mailing Address (if different)	Unit/Suite	City		State	Zip Code	
Owner Name PRAELL M. Christie	Co Owner		Phone UO4-610	-7872	E-Mail Ornell. Christie @ 9ma	
Owner Address 109 Windsail Way	Unit/Suite	City Fayet	teville	State GA	Zip Code 30215	
		•				
Property Owner Same as above	Unit/Suite	City		State	Zip Code	
une as agent	l			J		
Emergency Contact 1	Phone	Emergence	y Contact 2		Phone	
Do you hold a state license for your occupation? . Yes (Documentation Required)		State Card # Expira		Expiration	Issued To	
Form of Ownership Sole Proprietor Proprietorship		Business Type Administrate NAICS Support and WM and 56110			Tax Identification # 93-3132286	
Limited Liability Corporation*	poration* nership-unknown type	# Employees	t Services		GA Sales Tax #	
	neisiip-unknown type	A 17	face Calcadada	Drive Com	alated Application & Daymonts	
Exemptions	11 111		Tax Schedule	Bring Completed Application & Payment: check, cash, or credit card to:		
	bled Veteran*		16-25 \$500.00 26-50 \$750.00	140 Stonewall Avenue West, Suite 10		
*Documentation is required		4-6 \$150.00		Fayetteville, GA 30214		
I swear under penalty of law that the above information is true and			51-100 \$1,000.00 101+ \$10.00 each	Make Checks Payable to Fayette County		
correct. I understand that this is a tax certificate. I must separately				I-lake click	No rayable to rayatta country	
comply with any zoning, Fire Marshal, Health, or other rules. I		Maximum Tax \$1,500.00 Signature of Business Owner Date				
understand that information I provide herein (or my refusal to provide required information) will be shared with the Georgia						
Department of Revenue.	t the deorgia	Auell	14 CM	MI	10-10-23	
Finance Department U	とはいい 神田ではないのの間をいるできる	DISTRICT	Land Lot	27	Zoning District	
Cash Check # Money Order	X Credit/Debit Card	Allowable	Allowable for Business Use		t Allowable for Business Use.	
Finance Signature Date	XBOTSS Reporting 0/17/2023	Planning & 2	Coning Signature	26	Date	

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< FAYETTE COUNTY

Confirmation

Submission Information

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Status

Submitted

Confirmation Number

0-976-949-704

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

17-Oct-2023

Your confirmation number is 0-976-949-704.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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Department of Revenue

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FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Performance Contracting Group, Inc.			Phone 913-888-8600		Home Occupation Commercial	
Physical Address 140 Etowah Trace	Unit/Suite	city Fayetteville		State GA	Zip Code 30214	
Mailing Address (if different) 11145 Thompson Ave		city Lenexa		state KS	zip Code 66219	
Owner Name Performance Contracting, Inc.	Co Owner		Phone 913-888-86	600	E-Mail taxdepartment@pcg.com	
Owner Address 11145 Thompson Ave	Unit/Suite City Lenexa			State KS	zip Code 66219	
Property Owner Marksmen Properties, Inc.	1 '	city 180 Walte	er Way	State GA	Zip Code 30214	
Emergency Contact 1 Gail Collier			cy Contact 2		Phone	
Do you hold a state license for your occupation? Yes (Documentation Required)		State Card #		Expiration Issued To		
Form of Ownership Sole Proprietor Proprietorship		Business Typ Business Sup	e oport Services		Tax Identification # 34-1479087	
				E-Verify	GA Sales Tax #	
Non Profit 501 c 3* Disabled Veteran*		0-3 \$75.00 4-6 \$150.00 7-10 \$250.00	51-100 \$1,000.00	Bring Completed Application & Payment: check, cash, or credit card to: 140 Stonewall Avenue West, Suite 101 Fayetteville, GA 30214		
correct. I understand that this is a tax certificate. I must separately comply with any zoning, Fire Marshal, Health, or other rules. I		Maximum 1	101+ \$10.00 each	Make Checks Payable to Fayette County		
understand that information I provide herein (or my refusal to provide required information) will be shared with the Georgia Department of Revenue.		Signature of Business Owner O9/26/2023				
Finance Department Use:		Planning & Zoning Use:				
	X redit/Debit card	571 Land Lot 232			Zoning District	
Finance Signature Date			oning Signature	-	Allowable for Business Use	

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← FAYETTE COUNTY

Confirmation

Submission Information

Logon

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Status

Submitted

Confirmation Number

0-028-056-008

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

31-Oct-2023

Your confirmation number is 0-028-056-008.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials



FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name RJ MEDICAL SUPPLIES, INC			Phone 404-808-51		Home Occupation Commercial	
Physical Address Unit/Suite 1572 HWY 85 N 338		City Fayetteville		State GA	Zip Code 30214	
Mailing Address (if different) Unit/Suite		City		State	Zip Code	
Owner Name Co Owner JUDITH FAIRCLOUGH			Phone 404808511	8	E-Mail REDBIRDM45@GM/	
Owner Address 170 WHITNEY WAY	Unit/Suite	City FAYETTEVILLW		State GA	Zip Code 30214	
Property Owner	Property Owner Unit/Suite		City		Zip Code	
Emergency Contact 1	gency Contact 1 Phone		Emergency Contact 2		Phone	
Do you hold a state license for your occupation? Yes (Documentation Required)		State Card # Expiration		Expiration	Issued To	
Form of Ownership Sole Proprietor Proprietorship		Business Typ DURABLE	e E MEDICAL :	NAICS NAICS	Tax Identification # 92-1582099	
	oration* nership-unknown type	# Employees O			GA Sales Tax #	
Exemptions		Annual T	ax Schedule	Bring Comp	pleted Application & Payment:	
Non Profit 501 c 3* Disabled Veteran*		0-3 \$75.00	16-25 \$500.00	check	c, cash, or credit card to:	
*Documentation is required 💭		4-6 \$150.00	26-50 \$750.00	140 Stone	wall Avenue West, Suite 101	
I swear under penalty of law that the above info	mation is true and	7-10 \$250.00 51-100 \$1,000.00		Fayetteville, GA 30214		
correct. I understand that this is a tax certificate. I must separately					ks Payable to Fayette County	
comply with any zoning, Fire Marshal, Health, or other rules. I		Maximum Tax \$1,500.00				
		Signature of Business Owner Date 9-3-23				
provide required information) will be shared with the Georgia		Stanlong 7-5-20				
Department of Revenue.					3.00	
Finance Department Use:		Planning & Zoning Use:				
X New Codate License 1056		District Land Lot 2000			Zoning District	
Cash Check # Money Order	Credit/Debit Card	Allowable for Business Use		No	t Allowable for Business Use	
Finance Signature Date 10	BOTSS Reporting /25/2023	Planning & Z	oning Signature		Date	

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← FAYETTE COUNTY

Confirmation

Submission Information

Logon

c056faye

Status

Submitted

Confirmation Number

0-537-086-408

Taxpayer Name

Submission Title

FAYETTE COUNTY

STI

20229623414

J.,

BOTSS Data Submission

Submitted

25-Oct-2023

Your confirmation number is 0-537-086-408.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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Print Confirmation

Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials





FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

Business Name The Icy Spot, LLC	The Icy Spot	Phone 470517633		3	Home Occupation Commercial	
Physical Address 101 Kenwood Rd	Unit/Suite 40	city Fayetteville		State GA	Zip Code 30214	
Mailing Address (If different)	Unit/Suite	City		State	Zip Code	
Owner Name Co Owner Clarence Adams Joi Adams		Phone 7028847540		0	E-Mail tis@theicyspotga.com	
Owner Address 105 Marina Ct	Unit/Suite	City Fayetteville		State GA	Zip Code 30215	
Property Owner	roperty Owner Unit/Suite		City		Zip Code	
Emergency Contact 1	Phone	Emergency Contact 2			Phone	
Do you hold a state license for your occupation? Yes (Documentation Required)		State Card # Expiration		Expiration	Issued To	
Form of Ownership Sole Proprietor Proprietorship				NAICS 3115zu	Tax Identification # 922026592	
	poration* nership-unknown type	# Employees O		E-Verify	GA Sales Tax #	
Exemptions		Annual Tax Schedule Bring Com			pleted Application & Payment:	
Non Profit 501 c 3* Disabled Veteran*		0-3 \$75.00	16-25 \$500.00	check, cash, or credit card to:		
*Documentation is required \(\subseteq \)		4-6 \$150.00	26-50 \$750.00	140 Stonewall Avenue West, Suite 101		
I swear under penalty of law that the above information is true and		7-10 \$250.00	51-100 \$1,000.00	Fayetteville, GA 30214		
correct. I understand that this is a tax certificate. I must separately		11-15 \$375.00	101+ \$10.00 each	Make Checks Payable to Fayette Coun		
comply with any zoning, Fire Marshal, Health, or other rules. I		Maximum Tax \$1,500.00				
understand that information I provide herein (or my refusal to		Signature of Business Owner Date				
provide required information) will be shared with the Georgia		4.11.23				
Department of Revenue.		1 yez				
Finance Department U	se:		Planni	ing & Zoning	Use:	
New Update License	# 669	District Land Lot 219			Zoning District ←)-(
X Cash Check # Money Order	Credit/Debit Card	Allowable f	or Business Use	Not	Allowable for Business Use	
Finance Signature Tracey Taylor Date	X BOTSS Reporting 10/11/2023	Planning & Z	oning Signature		Date 11,203	

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< FAYETTE COUNTY

Confirmation **Submission Information** Logon c056faye Status Submitted 1-514-349-000 Confirmation Number **FAYETTE COUNTY** Taxpayer Name STI 20229623414 Submission Title **BOTSS Data Submission** Submitted 11-Oct-2023 Your confirmation number is 1-514-349-000. Your request has been submitted and will be processed in the order that it was received. If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711). Printable View 105669 OK

Print Confirmation

Department of Revenue

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FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

RENEWAL DUE BY JANUARY 31 EACH YEAR							
Business Name Tolines Contracting LLC	DBA (if different)		Phone 770-231-30	062	Home Occupation Commercial		
Physical Address 783 Ebenezer Rd	Unit/Suite	l our à		State GA	Zip Code 30215		
Mailing Address (if different) 312 Crosstown Dr	Unit/Suite 216	lour)		State GA	Zip Code 30269		
Owner Name Matthew Buckley	Co Owner	Co Owner Phone 770-231-300)62	E-Mail Matthew@TolinesContracting.com		
Owner Address 146 Marcdale Blvd	Unit/Suite	1-1-7		State FL	Zip Code 33785		
Property Owner Barbara Buckley	Unit/Suite	into party		State GA	Zip Code 30269		
Emergency Contact 1 Matthew Buckley			Emergency Contact 2 Kelli Buckley		Phone 813-728-1057		
Po you hold a state license for your occupation? Yes (Documentation Required)		State Card # Expiration		Issued To			
Form of Ownership Sole Proprietor Proprietorship		Business Typ Concrete (Contracting	NATCS 2362ZU	Tax Identification # 88-2385904		
	orporation* artnership-unknown type	# Employees 2		E-Verify	GA Sales Tax #		
Non Profit 501 c 3* Disabled Veteran* *Documentation is required		0-3 \$75.00 4-6 \$150.00	Tax Schedule 16-25 \$500.00 26-50 \$750.00	check	pleted Application & Payment: c, cash, or credit card to: cwall Avenue West, Suite 101		
I swear under penalty of law that the above information is true and correct. I understand that this is a tax certificate. I must separately comply with any zoning, Fire Marshal, Health, or other rules. I		11-15 \$375.00	51-100 \$1,000.00 101+ \$10.00 each Tax \$1,500.00		nyetteville, GA 30214 cks Payable to Fayette County		
understand that information I provide herein (or my refusal to provide required information) will be shared with the Georgia Department of Revenue.		Signature of Business Owner Mutth J.B. 9/12/202,3					
Finance Department Use:		Planning & Zoning Use:					
X New Update Licer	se # 5670	District Land Lot 3 3			Zoning District		
Finance Signature Tracey Taylor Date	- W		for Business Use		Date 51 13 2020		
					and the second s		

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< FAYETTE COUNTY

Confirmation **Submission Information** c056faye Logon Submitted Status Confirmation Number 1-867-633-096 **FAYETTE COUNTY** Taxpayer Name 20229623414 STI **BOTSS Data Submission** Submission Title 16-Oct-2023 Submitted Your confirmation number is 1-867-633-096. Your request has been submitted and will be processed in the order that it was received. If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711). Printable View 105670 OK

Print Confirmation

Department of Revenue

Trucking Portal

Appeal to the GA Tax Tribunal

Video Tutorials





FOR BUSINESSES LOCATED IN UNINCORPORATED FAYETTE COUNTY ONLY

RENEWAL DOE DI SANDARY SI EACH LEAR							
Business Name	DBA (if different)		Phone	217	Home Occupation		
urban Chicks			404 621-	1001	Commercial		
Physical Address	Unit/Suite	Fayette	Puille,	State 6A	21p Code 30214		
Mailing Address (if different)	Unit/Suite	City		State A	Zip Code		
Owner Name	Co Owner		Phone		E-Mail		
Kananna Ellis	lleah Gri	ffin	404-621-	7307	Kanannamoldag		
Owner Address	Unit/Suite	City		State	Zip Code		
104 watking Glen Dr.		McDor	nough	GA	30252		
Businests Owner	Unit/Suite	City	0	State	Zip Code		
Property Owner	200	Fauell	eville.	6A	30214		
Sthroge VXtra		II OCOJETA	CVIIIE		Deary		
Emergency Contact 1	Phone 11019 4036		y Contact 2		Phone		
Do you hold a state license for your yes (Documentation Required)	our occupation?	State Card #		Expiration	Issued To		
Form of Ownership		Business Type		NAICS	Tax Identification #		
Sole Proprietor Pro	oprietorship	praidi	ng salon	812199	×85-2548081		
Limited Liability Corporation*	rporation*	# Employees)	E-Verify #	GA Sales Tax #		
General Partnership	rtnership-unknown type						
Exemptions		Annual Tax Schedule Bring Com		pleted Application & Payment:			
Non Profit 501 c 3* Disabled Veteran*		0-3 \$75.00	16-25 \$500.00	check, cash, or credit card to:			
*Documentation is required		4-6 \$150.00	26-50 \$750.00	140 Stone	140 Stonewall Avenue West, Suite 101		
I swear under penalty of law that the above inf	ormation is true and	7-10 \$250.00	51-100 \$1,000.00	Fayetteville, GA 30214			
correct. I understand that this is a tax certificate. I must separately		11-15 \$375.00	101+ \$10.00 each	Make Checks Payable to Fayette Count			
comply with any zoning, Fire Marshal, Health, or other rules. I		Maximum Tax \$1,500.00					
understand that information I provide herein (o	or my refusal to	Signature of Business Owner Date					
provide required information) will be shared with the Georgia		A	91)	,	00120102		
Department of Revenue.					08/30/83		
Finance Department Use:		Planning & Zoning Use:					
X Now Undate Licen:	ZWIEGOS WAIVANGES DE BERN	District 5 M	Land Lot 200		Zoning District		
Cash Check # Money Order X Credit/Debit-Card					t Allowable for Business Use		
Finance Signature Date 1	X BOTSS Reporting 0/16/2023	Planning	Zoning Signature		Date /- JC. 30, 2023		

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< FAYETTE COUNTY

Confirmation Submission Information

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Logon

c056faye

Status

Submitted

Confirmation Number

0-857-461-192

Taxpayer Name

FAYETTE COUNTY

STI

20229623414

Submission Title

BOTSS Data Submission

Submitted

16-Oct-2023

Your confirmation number is 0-857-461-192.

Your request has been submitted and will be processed in the order that it was received.

If you have any questions, please contact us at 1-877-GADOR11 (1-877-423-6711).

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An official website of the State of Georgia

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