



## CBL-996

### Commercial Business Occupational Tax Certificate

**Status:** Active

**Date Created:** Mar 1, 2022

#### Internal Only

##### Business Classification 1

Gen 2 - Services

Visit the NAICS (<https://www.naics.com/search/>) website to search for NAICS Code & Business Type.

##### NAICS Code 1

531110

##### Business Type 1

Lessors of Residential Buildings and Dwellings

##### Ward Number

1

##### Mayor & Council Date

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##### Decision

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#### Fire Marshal Review Control Panel - Internal

#### Business Information

##### Business Status

Renewal

##### Has any information changed for your business?

Yes

If yes, please check all that apply:

##### Previous Name of Business

2330 COBB PKWY LLC

##### Legal Name of Business

2330 COBB PKWY LLC

##### Type of Business

Limited Liability Corporation

##### City

Smyrna

##### Zip Code

##### Business Name Change



##### Previous DBA (Doing Business As)

Elevate at The Battery

##### DBA (Doing Business As)

Elevate Twenty Three

##### Street Address

2330 Cobb Pkwy SE

##### State

GA

##### Business Telephone

30080

**Business Email**

elevatetwentythree@firstcommunities.com

**Federal Tax ID Number (EIN)**

xx-xxx7143

**Dollar Amount of Total Gross Receipts**

**Is your Mailing Address different from your Business Address?**

No

**Full Description of Business**

Multifamily Housing

Days Open for Business

**Tuesday**



**Thursday**



**Saturday**



**Weekday Business Hours (example: 9 AM–5 PM)**

9 am - 6 pm

**Weekend Business Hours (example: 9 AM–5 PM)**

Saturday 10 am - 5 pm

770-615-0235

**Business Website**

[https://www.elevatetwentythree.com/?utm\\_source=GMB&utm\\_medium=organic](https://www.elevatetwentythree.com/?utm_source=GMB&utm_medium=organic)

Please do not add dollar sign (\$) or commas (,) to the dollar amount below.

**Monday**



**Wednesday**



**Friday**



**Other**



**Is the Applicant a Corporation?**

No

**Applicant Date of Birth**

**Applicant Information**

Please choose Applicant's title below:

**If other, please list your title below**

Agent for Owner

**Applicant Driver's License Number**

**Business Owner Information**

**Is the Business owned by a Corporation?**

No

**Business Owner Street Address**

**Business Owner Name**

2330 Cobb Pkwy LLC

**Business Owner City**

934 Old Gallows Rd. Ste. 350

Vienna

**Business Owner State**

VA

**Business Owner Zip Code**

22182

**Business Owner Telephone**

770-615-0235

**Business Owner Email**

elevatetwentythree@firstcommunities.com

**Business Owner Social Security Number**

xxx-xx-7143

**Do you own the property?**

Yes

**Officers/Partners Information**

**If a partnership, attach list showing each partner owning 10% or more with address, telephone number, Date of Birth, and Social Security Number.**

**Business Questionnaire**

**Georgia Requirements: Georgia law, O.C.G.A. § 36-60-6, requires all businesses, with 11 or more employees, that are seeking an occupation tax certificate/business license or other document required to operate a business with a county or city to sign an affidavit attesting that they are registered for and use E-Verify. For more information go to <https://www.e-verify.gov/>.**

**Number of employees**

5

**Smyrna Employee Count**

5

**\*All personnel requiring a license from the Professional Licensing Board of the State of Georgia must provide a copy of the current document for each business.**

**Are you professionally licensed through the State of Georgia? (This is not the business registration with the State.)**

No

**Do you qualify for Disabled Veteran's Status?**

No

**Does this business qualify as a Non-Profit?**

No

**Does this business qualify for exemption with the State of Georgia?**

No

**Is this application for an Auto Broker?**

No

**Is this a Food Service Establishment or Beverage & Snack Bar?**

No

**Is this an Insurance Agency/Company?**

No

**Is this a Car Wash?**

No

**Does this business have pool tables?**

No

**Is this application for a Holiday Tree Lot or Produce Stand?**

No

**Do you wish to sell alcohol at this business?**

No

**\*If yes, an Alcohol License application must also be submitted.**

## Permitting Information

**Does the business plan to change existing signs or add new signs?**

No

**\*A sign permit must be obtained through the Community Development Department before changing or adding a sign.**

**Will there be renovations of any kind, inside or outside the structure?**

Yes

**If yes, please describe the renovations in detail.**

Permits have already been requested by contractors conducting work

**\*Please contact the Community Development Department to see if the work to be done requires a permit (678) 631-5387.**

**Will the outside of building be painted?**

Yes

If yes, colors must be muted earth tone.

## Business Emergency Information

**Business After Hours Telephone**

770-615-0235

**Does your business have a fire sprinkler system?**

Yes

**Does your business have a Knox Box?**

No

**Does "SARA TITLE III" apply to your business?**

No

[Click here to view the consolidated list of chemicals that are subject to SARA Title III as defined by the U.S. Environmental Protection Agency.](https://viewpointcloud.blob.core.windows.net/profile-pictures/EPA_Consolidated_List_of_Chemicals_Wed_Jan_26_2022_16:59:16_GMT+0000_(Greenwich_Mean_Time).pdf)

([https://viewpointcloud.blob.core.windows.net/profile-](https://viewpointcloud.blob.core.windows.net/profile-pictures/EPA_Consolidated_List_of_Chemicals_Wed_Jan_26_2022_16:59:16_GMT+0000_(Greenwich_Mean_Time).pdf)

[pictures/EPA\\_Consolidated\\_List\\_of\\_Chemicals\\_Wed\\_Jan\\_26\\_2022\\_16:59:16\\_GMT+0000\\_\(Greenwich\\_Mean\\_Time\).pdf](https://viewpointcloud.blob.core.windows.net/profile-pictures/EPA_Consolidated_List_of_Chemicals_Wed_Jan_26_2022_16:59:16_GMT+0000_(Greenwich_Mean_Time).pdf))

## License Agreement

**I, the applicant, do hereby swear and affirm that I have read, understand and agree to abide by the Commercial Business License Ordinance as set forth in the City of Smyrna Code of Ordinances. Further, I understand that failure to abide by the referenced ordinance will result in the revocation of said occupation license.**

### Signature of Applicant

Tabitha Huber

03/01/2022