



**TOWN OF HILTON HEAD ISLAND**  
**REVENUE SERVICES**  
 One Town Center Court  
 Hilton Head Island, SC 29928  
 Phone: (843) 341-4677 Fax: (843) 341-4637  
 Email: RS@hiltonheadislandsc.gov

# \_\_\_\_\_ / \_\_\_\_\_

## Residential or Commercial Property Rental Business License Application

**ALL INCOMPLETE APPLICATIONS WILL BE RETURNED**

PROPERTY OWNER NAME \_\_\_\_\_

PROPERTY OWNER MAILING ADDRESS \_\_\_\_\_

PROPERTY OWNER EMAIL (REQUIRED FOR WEB ACCESS) \_\_\_\_\_

PROPERTY OWNER CELL PHONE NUMBER \_\_\_\_\_

SOCIAL SECURITY (LAST 4 DIGITS) \_\_\_\_\_ **OR** FEDERAL EIN # \_\_\_\_\_

ADDITIONAL CONTACT INFORMATION (SHOULD BE DIFFERENT THAN ABOVE)

NAME \_\_\_\_\_ CELL PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_ RELATIONSHIP TO APPLICANT \_\_\_\_\_

HOW IS YOUR PROPERTY TITLE DEED LISTED WITH BEAUFORT COUNTY?

SOLE PROPRIETORSHIP       CORPORATION       TRUST       LLC/LLP       OTHER

NAME ON DEED \_\_\_\_\_

LIST ADDRESS OF ALL RENTAL PROPERTIES OWNED IN THE TOWN. PLEASE INCLUDE UNIT/APT NUMBER.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DATE YOU BEGAN RENTING PROPERTY \_\_\_\_\_

SELECT HOW YOU RENT THE PROPERTY:  LONG TERM     SHORT TERM     BOTH     COMMERCIAL

PROPERTY MANAGEMENT COMPANY  VRBO     AIRBNB     SELF    OTHER \_\_\_\_\_

DOES ABOVE PROPERTY MANAGEMENT COMPANY MANAGE 100% OF ALL RENTALS?  YES  NO

IF NO, WHO MANAGES THE OTHER RENTALS? \_\_\_\_\_

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FOR SHORT TERM RENTALS ONLY:

IF YOU OWN RESIDENTIAL PROPERTY AND RENT FOR INTERVALS LESS THAN 90 DAYS, YOU ARE REQUIRED TO COLLECT 1% ACCOMMODATIONS TAX AND 2 % BEACH PRESERVATION FEES FROM YOUR TENANTS AND REMIT TO THE TOWN.

DOES YOUR PROPERTY MANAGEMENT COMPANY REMIT ACCOMMODATIONS TAX ON YOUR BEHALF?  YES  NO

IF NO, PROVIDE YOUR SOUTH CAROLINA RETAIL LICENSE NUMBER \_\_\_\_\_

A SOUTH CAROLINA RETAIL LICENSE IS REQUIRED IF YOU ARE REMITTING ACCOMMODATIONS TAX

PLEASE CHOOSE ONE:  REMIT TAX QUARTERLY OR  REMIT TAX MONTHLY

IF NO SELECTION IS MADE, YOUR ACCOUNT WILL DEFAULT TO QUARTERLY REMITTANCE

AS OWNER, OFFICER, PRINCIPAL OR MANAGING MEMBER OR AUTHORIZED AGENT, BY MY SIGNATURE BELOW, I AFFIRM UNDER OATH THAT ALL OF THE INFORMATION ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, THAT I AM COMPLIANT WITH ALL TOWN, STATE AND FEDERAL REGULATORY REQUIREMENTS AND THAT I HAVE THE AUTHORITY TO MAKE THIS APPLICATION. I AFFIRM UNDER OATH THAT ALL ASSESSMENTS, TAXES, FEES, AND PERSONAL PROPERTY TAXES DUE AND PAYABLE TO THE TOWN AND COUNTY HAVE BEEN PAID. I AFFIRM UNDER OATH THAT I WILL MAINTAIN ACCURATE CONTACT INFORMATION FOR RESPONSIBLE PERSONS ON FILE WITH THE TOWN AND THE COUNTY. I UNDERSTAND THAT THE TOWN ORDINANCE PROVIDES FOR PENALTIES AND LICENSE REVOCATION FOR MAKING FRAUDULENT STATEMENTS ON THIS APPLICATION.

I HEREBY ACKNOWLEDGE THAT IF MY BUSINESS COLLECTS GROSS PROCEEDS FROM THE LEASE/RENTAL OF SLEEPING ACCOMMODATIONS TO THE SAME PERSON (S) FOR A PERIOD OF LESS THAN 90 DAYS, I WILL COLLECT AND REMIT LOCAL ACCOMMODATIONS TAX AND BEACH PRESERVATION FEE IN ACCORDANCE WITH TOWN CODE TITLE 4 CHAPTERS 12 AND 9, RESPECTIVELY.

**APPLICATION MUST BE SIGNED BY OWNER, OFFICER OR PRINCIPAL MANAGING MEMBER.**

**BUSINESSES OPERATING WITHOUT A VALID BUSINESS LICENSE ARE SUBJECT TO PENALTIES AND FINES. A BUSINESS MAY BE ASSESSED A 5% PENALTY FOR EACH MONTH OR PORTION THEREOF FOR OPERATING WITHOUT A TOWN BUSINESS LICENSE. ADDITIONALLY, BUSINESSES MAY BE SUBJECT TO A \$1087.50 MUNICIPAL SUMMONS.**

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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ADMINISTRATIVE USE ONLY:

APPLICATION ACCEPTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICATION FEE RECEIVED: \_\_\_\_\_ NAICS: \_\_\_\_\_

BUSINESS DOCUMENTS: \_\_\_\_\_ OWNER/PRINCIPAL ID: \_\_\_\_\_

## REQUIRED DOCUMENTS:

1. ENTITIES: ARTICLES OF INCORPORATION, ARTICLES OF ORGANIZATION, TRUST AGREEMENT  
Not required for Sole Proprietorships  ATTACHED
  2. ENTITIES: LIST OF MEMBERS, OFFICERS OR MANAGING PARTNERS  ATTACHED
  3. ENTITIES: REGISTRATION WITH SC SECRETARY OF STATE  
(Out of state entities will require a Certificate of Authorization from SC Secretary of State)  
Contact SC SOS with questions [www.scsos.com](http://www.scsos.com) or 803-734-2158  ATTACHED
  4. SC RETAIL LICENSE  
Contact SC DOR with questions [www.dor.sc.gov](http://www.dor.sc.gov) or 803-898-5788  ATTACHED
  5. THE APPLICATION MUST BE SIGNED BY THE OWNER, OFFICER OR PRINCIPAL MANAGING MEMBER OF THE BUSINESS  
(If the principal owner cannot deliver the application in person, written authorization for an agent must be provided)
  6. \$10.00 NON-REFUNDABLE APPLICATION FEE  ATTACHED  
Checks payable to the Town of Hilton Head Island
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