



CITY OF ATLANTA
DEPARTMENT OF FINANCE | OFFICE OF REVENUE | BUSINESS TAX DIVISION
55 TRINITY AVENUE, S.W. – SUITE 1350 ATLANTA, GEORGIA 30303
PHONE: (404) 330-6270 | EMAIL: BIZTAX@ATLANTAGA.GOV



Please review the Atlanta Code of Ordinances that governs insurance registrants to ensure annual compliance.

- **Sec. 30-816. - Definitions.** *Insurer* means a company which is authorized to transact business in any of the classes of insurance designated in O.C.G.A. § 33-3-5(1).
- **Sec. 30-817. - Insurer's license fees.** There is levied an annual license fee in the amount of \$150.00 upon each insurer doing business within the city. For each separate business location in excess of one not covered by section 30-818, which is operating on behalf of such insurer within the city, there is levied a license fee in the amount of \$150.00.
- **Sec. 30-818. - License fee for insurers insuring certain risks at additional business locations.** For each separate business location not otherwise subject to a license fee under this article that is operated and maintained by a business organization which is engaged in the business of lending money or transacting sales involving term financing and in connection with such loans or sales offers, solicits or takes applications for insurance through a licensed agent of an insurer for insurance, the insurer shall pay an additional license fee of \$52.50 per location for each year.
- **Sec. 30-819. - License fees for independent insurance agencies, brokers not otherwise licensed.** There is levied an annual license fee upon independent agencies and brokers for each separate business location from which an insurance business is conducted and which is not subject to the company license fee imposed by section 30817 in the amount of \$150.00 for each such location within the city.
- **Sec. 30-820. - Due Date for License Fees.** License fees imposed under this article shall be due and payable on or before January 25. The fees shall be collected by the city as provided by law

Please note: Per Sec. 30-51 of Atlanta's Code of Ordinances, an insurance entity doing business in the City must meet the Zoning requirements of the particular area where that entity conducts business.

Zoning must confirm that the type of business to be operated is permitted by the zoning code at the location where the business is to be conducted and to sufficiently identify the location of the business for the purposes of enforcement. **Zoning review requires a \$50 processing fee.** Further, if a business has one or more locations, each location would be considered as a separate business for purposes of registration.



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INSURANCE REGISTRATION

Purpose: To establish a City of Atlanta insurance business license as prescribed by the City of Atlanta Code of Ordinances. Per Sec. 30-51 of Atlanta’s Code of Ordinances, an insurance entity doing business in the City must meet the Zoning requirements of the particular area where that entity conducts business.

Please check () the appropriate registration selection:

- | | |
|--|------------------------------|
| <input type="checkbox"/> Insurance Company (IN01) | Annual License Fee: \$150.00 |
| <input type="checkbox"/> Insurance Term Finance Only (IN02) | Annual License Fee: \$52.50 |
| <input type="checkbox"/> Insurance Agent/Agency (IN03) | Annual License Fee: \$150.00 |
| <input type="checkbox"/> Independent Insurance Agency (IN04) | Annual License Fee: \$150.00 |
| <input type="checkbox"/> Insurance Broker (IN05) | Annual License Fee: \$150.00 |

Authorized Officer of Business: _____ Date Filed: _____

Firm/Company Name: _____

Federal Tax I.D. Number: _____

Business Address: _____

Mailing Address: _____

Email Address: _____ Phone: _____

ACKNOWLEDGEMENT AND CONFIRMATION

I declare under penalty of making false declaration, that I am authorized to complete this form and to the best of my knowledge and belief, it is a true, correct and complete statement made in good faith.

Signature	Title	Date

OFFICIAL USE ONLY

Zoning Approved: () Zoning Denied: ()

Conditions: _____

Lot: _____ District: _____ Zoning District: _____

Approved By: _____ Date: _____ Account #: _____