

CITY OF SLIDELL FINANCE DEPARTMENT



City of Slidell Occupational License
2045 Second St., Ste 214 • P.O. Box 828
Slidell, LA 70459

985-646-4310
(fax) 985-646-4223
(email) occupationallic@cityofslidell.org

License Renewal Notice

Location: **554 OLD SPANISH TRAIL**
SLIDELL, LA 70458-0000

2025

Valid 01/01/2025 - 12/31/2025
Account #: **00002747**
Type: **Engineering**

DAMMON ENGINEERING
DAMMON ENGINEERING INC.

List Mailing Address Change Here

554 OLD SPANISH TRAIL
SLIDELL LA 70458

ALL QUESTIONS MUST BE ANSWERED

Has the Business LOCATION changed? YES NO
Has the OWNERSHIP changed? YES NO
Has the CORP/LLC/PARTNERSHIP changed? YES NO
Has the TRADE NAME/DBA changed: YES NO

If YES to above, call Occ Lic at 985-646-4310

Renewal Date for OCCUPATIONAL LICENSE is January 1 of each year and becomes delinquent on March 1.
Payment received or postmarked on or after March 1 will be assessed a penalty plus interest.

GROSS RECEIPTS

Your license fee for 2025 is based on 2024 gross receipts.

If in business less than one year, your fee is based on annualized gross receipts in 2024 as calculated on line 4 below:

- 1. Actual gross receipts in 2024 \$ 276,691.35
- 2. Number of months in business in 2024 12
- 3. Average monthly receipts (line 1 divided by line 2) \$ 23,057.61
- 4. Annualized gross receipts in 2024 (line 3 multiplied by 12) \$ 276,691.35

If in business ALL of 2024, your fee is based on actual gross receipts in 2024 declared below.

Actual gross receipts in 2024 \$ 276,691.35

AMOUNT DUE

- A. License Fee Due (Gross Receipts x .001) \$ 276.69 Due January 1, 2025 Renewal License Notice. SEE TABLE ON REVERSE SIDE.
- B. Penalty Due _____ If paid on or after March 1, add 5% per month or fraction thereof (MAX 25%)
- C. Interest Due _____ If paid on or after March 1, add 1.25% per month or fraction thereof
- D. TOTAL AMOUNT DUE _____ Add A, B and C

Check # _____ Total Remitted \$ 276.69
FILL OUT COMPLETELY

Check here if business closed (), give date of closure _____ and sign below.

I, the undersigned, do swear (or affirm) that the foregoing figures and statements are true full and correct to the best of my knowledge and belief.

David Dammon (985) 649-5832 1/7/2025
Signature of Owner, Agent, Officer AND Title Phone Date

David Dammon david@dammonengineering.com
PRINT NAME EMAIL ADDRESS

Signature of Preparer Phone Date

PRINT NAME EMAIL ADDRESS

SEE REVERSE SIDE