

TOWN OF ELKTON, VIRGINIA

APPLICATION FOR BUSINESS LICENSE FOR 20_____

TREASURER'S OFFICE
173 W SPOTSWOOD TRAIL

10% PENALTY OF INTEREST AND 10% ANNUM INTEREST SHALL BE ADDED AFTER
June 1st

ELKTON, VA 22827

CHECK ONE:

- INDIVIDUAL _____
- PARTNERSHIP _____
- CORPORATION _____
- LLC _____

PLEASE TYPE OR PRINT

NAME OF APPLICANT: _____

TRADE NAME: _____

ADDRESS: _____
(LOCAL) (HOME OFFICE)

TYPE OF BUSINESS OR PROFESSION _____
PLEASE TYPE OR PRINT

DATE STARTED _____

THE INFORMATION FURNISHED BY YOU UPON THIS FORM IS THE BASIS USED IN ASSESSING YOUR BUSINESS LICENSE IN THE TOWN OF ELKTON, VIRGINIA

- 1 COIN OPERATED OR DEVICES \$ _____
TOTAL GROSS RECEIPTS FOR PAST CALENDAR YEAR
NUMBER OF MACHINES _____
(A LIST OF MACHINE TYPE LOCATION AND ADDRESS MUST ACCOMPANY THIS APPLICATION)
- 2 CONTRACTORS (ALL TYPES) \$ _____
TOTAL GROSS RECEIPTS FOR PAST CALENDAR YEAR
- 3 FINANCIAL, REAL ESTATE & OTHER PROFESSIONAL SERVICES \$ _____
TOTAL GROSS RECEIPTS FOR PAST CALENDAR YEAR
- 4 REPAIR, PERSONAL, AND BUSINESS SERVICE \$ _____
TOTAL GROSS RECEIPTS FOR PAST CALENDAR YEAR
- 5 RETAIL MERCHANTS \$ _____
TOTAL GROSS RECEIPTS FOR PAST CALENDAR YEAR
- 6 TELEPHONE, TELEGRAPH, WATER OR HEAT, LIGHT AND POWER COMPANIES \$ _____
TOTAL GROSS RECEIPTS FROM BUSINESS IN TOWN DURING PRECEDING CALENDAR YEAR
- 7 WHOLESALE MERCHANTS \$ _____
TOTAL PURCHASES
- 8 OTHER BUSINESS OR SERVICES _____
SPECIFY TYPE OF BUSINESS \$ _____

IMPORTANT

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION AS TO GROSS RECEIPTS, SALES AND CONTRACTS IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT DATE

FORM MUST BE COMPLETED IN FULL AND A FEDERAL I.D. OR SS# MUST BE FURNISHED BEFORE BUSINESS LICENSE WILL BE ISSUED.

(FEDERAL I.D. NO. OR SOCIAL SECURITY NO.)

The above location is zoned for the business that is requested

ZONING ADMINISTRATOR DATE