

TOWN OF PULASKI
PO BOX 660
PULASKI VA 24301
PHONE: 540-994-8702
FAX: 540-994-8647

BUSINESS LICENSE NEW APPLICATION YES _____ NO _____
BUSINESS LICENSE RENEWAL YES _____ NO _____
THIS LICENSE COVERS DATES FROM ____-____-____ TO ____-____-____
For Business License Year March 1, 2011 through March 1, 2012

ALL INFORMATION ON THIS APPLICATION MUST BE FILLED OUT IN ITS ENTIRETY OR IT WILL BE RETURNED.

IF THIS IS A NEW BUSINESS, WHEN DID IT START ____-____-____

ACCOUNT NUMBER _____
CLERK _____
BUSINESS NAME _____
TRADING AS _____
TYPE OF BUSINESS OR PROFESSION _____
STREET ADDRESS _____
MAILING ADDRESS _____
CITY, STATE, ZIP _____
PHONE NUMBER _____
FEDERAL ID NUMBER _____

TYPE OF BUSINESS:

Sole Proprietorship _____ Partnership _____ Corporation _____ Other _____

ALL OWNERS MUST BE LISTED UNLESS SOLE PROPRIETORSHIP

PRINCIPAL OWNERS OF THE BUSINESS:

NAME _____
STREET ADDRESS _____
MAILING ADDRESS _____
PHONE NUMBER _____
SOCIAL SECURITY NUMBER _____

NAME _____
STREET ADDRESS _____
MAILING ADDRESS _____
PHONE NUMBER _____
SOCIAL SECURITY NUMBER _____

I hereby swear and verify that the information on this application is true and correct to the best of my knowledge and belief.
Given under my hand this _____ day of _____

APPLICANT'S SIGNATURE _____
TITLE _____

GROSS RECEIPT'S BASED ON PREVIOUS TAX YEAR

LICENSE FEE SCHEDULE

LICENSE TYPE	PER \$100	CALCULATION FACTOR
RETAIL	\$0.16	0.0016
CONTRACTOR	\$0.16	0.0016
FINANCIAL	\$0.40	0.0040
REAL ESTATE	\$0.40	0.0040
PROFESSIONAL	\$0.40	0.0040
REPAIR	\$0.20	0.0020
PERSONAL SERVICE	\$0.20	0.0020
BEER & WINE	\$37.50	
MIX DRINKS	\$200.00	
WHOLESALE FIRST 2 MIL	\$0.13	0.0013
WHOLESALE NEXT 1 MIL	\$0.05	0.0005
WHOLESALE OVER 3 MIL	\$0.01	0.0001

CALCULATE YOUR FEE – FOR A NEW BUSINESS, YOU WILL HAVE TO ESTIMATE YOUR GROSS FOR FIRST YEAR

FLAT FEE OF \$30.00

<p>BUSINESS GROSS RECEIPTS _____</p> <p>AMOUNT DUE ON GROSS RECEIPTS _____</p> <p>LATE PENALTY PAYMENT (10%) _____</p> <p>INTEREST CHARGES (10% PER ANNUM STARTING AFTER MARCH 1ST) _____</p> <p>TOTAL AMOUNT DUE _____</p>
--

****CONTRACTORS**

State board for contractor's registration number: _____

Initial here if you do not accept contracts of \$1500 or more: _____

All contractors applying for business license must provide proof of Workman Compensation Insurance, and a completed contractor's Certification of Insuring Liability for Workman Compensation in Virginia before a license can be issued.

TOBACCO PRODUCTS Are any sales applicable to the cigarette products tax? ____YES ____NO

If yes, who is the supplier (s) _____

MEALS TAX Are any sales applicable to the meals tax code? ____YES ____NO

VENDING MACHINES Does your business have any vending machines located in the Town of Pulaski?

____YES ____NO

If yes, include a detailed listing of the location and the number of all vending machines located within the Town.