



TOWN OF OCCOQUAN
 314 Mill Street - P.O. Box 195
 Occoquan, Virginia 22125
 (703) 491-1918 - info@occoquanva.gov

THE INFORMATION
 PROVIDED ON THIS FORM
 IS CONFIDENTIAL UNDER
 VA CODE §58.1-3.

2020 APPLICATION FOR BUSINESS LICENSE

BUSINESS NAME: _____

Check Box
 If New Business

BUSINESS ENTITY NAME: _____

Sole Proprietorship LLC PLLC Partnership Limited Partnership Corporation

OTHER TRADE NAMES USED: _____

If the applicant is a business entity, give the state where it was organized: _____

TYPE OF BUSINESS: _____

FEDERAL I.D. NUMBER (or Social Security Number* if sole proprietorship): _____

*Providing a Social Security Number is voluntary. The Town uses SSN's for the Set-off Debt Collection Act, Va. Code § 58.1-521.

BUSINESS STREET ADDRESS: _____ **P.O. BOX:** _____ OCCOQUAN, VA 22125

MAILING ADDRESS (if different from above): _____

BUSINESS PHONE: _____ **EMAIL ADDRESS:** _____

EMERGENCY PHONE: _____ **EMERGENCY PHONE #2:** _____

BUSINESS OWNER'S NAME(S)**

TITLE

**If the business is organized as a limited partnership, name the general partner.

BUSINESS CLASSIFICATION:
 (Please specify)

TAX RATE
 per \$100 of Gross Receipts

- Financial Services .33
- Professional Occupation .33
- Real Estate Services .33
- Hotel, Motels, Lodging, Etc. .26
- Repair, Personal, Business, or Other Services .20
- Retail Merchant .20
- Contractors, Builders, Developers .16
- Wholesale Merchant .05

I hereby certify that the following information is correct*:** (Town Code §111.11(c))

ANNUAL GROSS RECEIPTS \$ _____

(Multiplied by) **TAX RATE** _____

= **LICENSE FEE** \$ _____

The minimum fee, per Town Code §111.10, is \$30.00, unless otherwise exempted by the Code of Virginia. All applications are subject to audit.

*** Certification is not required from beginners.

EXCEPTIONS:

- Photographers with no regularly established place of business in the Commonwealth - **\$10.00** (Code of Virginia §58.1-3727)
- Savings and loan associations and credit unions **-\$50.00** (Code of Virginia §58.1-3730)
- Massage Establishment Permit Processing Fee **-\$25.00** (Town Code §112.28)
- Special license tax: See Town Code §§ 111.35 through 111.41

 Signature Title Date

FOR OFFICE USE ONLY

License Fee \$ _____ Check No: _____ Use Approved by Z/A on: _____
 Penalty (if any) \$ _____ Cash Receipt No.: _____ Cert of Occ Issued by PWC: _____
 Interest: \$ _____
 Total Paid \$ _____ Date Paid: _____ By: _____