

2019



TOWN OF WEST POINT BUSINESS LICENSE APPLICATION

Town of West Point Letrecia F. Moore, Treasurer P.O. Box 152 • West Point, VA 23181 • (804) 843-4362 • (804) 843-4364 (FAX)

SSN:		FED ID:	
Applicant Name & Mailing Address: _____ _____ _____		Business Name & Physical Address: _____ _____ _____	
Phone Number:	Business Phone:	Zoning Approval & Date:	Tax Year: 2019

Indicate if applicant is _____ (I) Individual (P) Partnership (C) Corporation

IF RENEWING PLEASE SELECT APPROVED BUSINESS TYPE FOR COMPUTING YOUR LICENSE FEE
RENEWAL IS BASED ON TOTAL GROSS RECEIPTS RECEIVED January 1, 2018 - December 31, 2018
NOTE: NEW BUSINESS APPLICANTS WILL PAY \$30.00 FOR INITIAL BUSINESS LICENSE

Business Type: A separate fee (minimum of \$30.00) will be assessed for multiple business types with gross receipts	Gross Receipts (x) multiplied by Tax rate	Tax Rate	=License Tax Amount (minimum \$30.00)
Retail Sales (1)	\$.0020	\$
Beer Only Sales (9) (in addition to Retail Sales tax)	Flat fee	\$25.00	\$
Beer/Wine Sales (10) (in addition to Retail Sales tax)	Flat fee	\$37.50	\$
Repair, Personal, & Business Service (2)	\$.0036	\$
Contractor (3) *\$25000 exemption <small>NOTE * Licensed Contractors are allowed an exemption of \$25,000 from their Gross Receipts if they hold a current VA Business License from another locality.</small>	\$.0016	\$
Financial, Real Estate, & Professional Services (4)	\$.0050	\$
Wholesale (5)	\$.0005	\$
Utilities (6)	\$.0050	\$
Credit Unions (7)	Flat Fee	\$50.00	\$

Total Tax (Add all applicable amounts) Minimum License Fee \$30.00 for each business type. Due March 1, 2019	\$
Late Filing Penalty (After March 1, 2019 - 10 % of Total Tax)	\$
Total Amount Due	\$

Instructions: Mail Original Application and Check Payable to Treasurer, Town of West Point on or before March 1, 2019. A 10% penalty will be assessed after 3/1/2019.

Declaration of Seller:

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

Name/Title: _____ Date: _____

The completion and issuance of this application for the Town Business License shall not be deemed to be approval to prosecute any business without obtaining zoning and use permits for the location in which you intend to locate.

For Office Use:
 Date Received: _____ Account Number: _____ Amount Paid: _____ New License: _____ Renewal: _____

2019



**Letrecia F. Moore, TREASURER
TOWN OF WEST POINT
329 SIXTH STREET
PO BOX 152
WEST POINT, VA 23181
Phone: (804) 843-4362
Fax: (804) 843-4364**

CLOSING A BUSINESS

If you are no longer operating a business in the Town of West Point, please complete this form and mail or fax it back to the Treasurer's Office.

Name: _____

Trading As (Business Name): _____

Account Number: _____ Date Closed: _____

Business Address: _____

Gross Receipts January 1 through Close Date: _____

New Owner's Name and Address (if applicable): _____

.....

Name: _____

Date: _____

Signature: _____

Phone: _____

Position/Title: _____

For Office Use:

Date Received: _____ Account Number: _____ Amount Paid: _____ New License: _____ Renewal: _____