

TOWN OF PORT ROYAL, VIRGINIA
APPLICATION FOR BUSINESS LICENSE

20__

FOR PERIOD BEGINNING _____ and ENDING _____ . 20__

Applicant _____

Street Address _____

Post Office _____ State _____ Zip _____

Trading as _____

Location where business to be conducted _____

Applicant is: () Individual () Partnership () Virginia Corporation () Foreign Corporation

Date Applicant began business at above location _____
(Date of charter if a Virginia Corporation or date of qualification to do business in Virginia if a foreign corporation)

Other business locations outside of Port Royal: _____

Name and Addresses of partners if applicant is a partnership:

NOTICE: A Business License is not a Zoning Certificate. It is the responsibility of the Applicant to ensure conformity to Zoning Ordinances.

Applicant Understand and Agrees:

Applicant applies for the following license (specify):

1) _____	Code Section	_____
2) _____		_____
3) _____		_____

Basis of Taxes (e.g. amount of gross Receipts or number of units operated)

	TAX	PENALTY	FEE
1) _____	\$ _____	\$ _____	\$ _____
2) _____	\$ _____	\$ _____	\$ _____
3) _____	\$ _____	\$ _____	\$ _____
	TOTALS	\$ _____	\$ _____

Total Taxes, Penalties, and Fees.....\$ _____

OATH – I, the undersigned applicant, do swear (or affirm) that the above statements and figures are true, complete and correct to the best of my ability and belief.

Signature of Applicant

By _____
Authorized Agent

LICENSE

I, the Treasurer of the Town of Port Royal, Virginia do find the above application to be in due form and accompanied by the sum of \$ _____. Therefore Licenses are this day granted the applicant named therein to transact the business, professions or employments set forth in the application at the specified location in the Town of Port Royal for the period beginning _____, 20__ and ending _____ 20__.

Date

Town Treasurer