## APPLICATION FOR COUNTY LICENSE

COUNTY IN WHICH APPLICATION MADE

LIC. NO.\_\_\_\_

## **GREENE COUNTY**

Federal Employer Ident. No.	Trade Name		l Phone Number	Date Business Began
APPLICAI	NT'S NAME AND MAILING ADDRESS		Individual Partnership Corporation	LICENSE YEAR  2017  FILE BY:  MARCH 1 2017
HOME ADDRESS OF APPLICANT		GREENE COUNTY BUSINESS ADDRESS		
STATE NATURE OF BUSINESS OR PROFESSION		OWNER OF REALTY ABOVE ADDRESS		
☐ Retail Merchant ☐ Wholesale Merchant ☐ Professional Occupa ☐ Business or Persona ☐ Repair Service Occu ☐ Contractor: Comple	ation al Service Occupation pation	PROOF OF G	ROSS RECEI	PTS REQUIRED R JUNE 1ST
II. IF YOU HAVE CHECKED	ANY OF THE ABOVE BOXES, PLEASE COMP	LICEN	SE BASIS	OFFICE USE ONLY TAX
Applicant who was in both Gross receipts throughout throughout the control of the control o	usiness throughout <b>2016</b> out 2015 as shown by applicant's records			
<ol> <li>Applicant who began after March 1, 2016 and prior to March 1, 2017 Estimated gross receipts in 2016 \$</li> </ol>				
3. Less Allowable Deducti	ons: Sales Tax - \$ Gas Tax - \$			
PAYABLE TO: COUNTY C	F GREENE		TOTAL TAX	
MAIL TO: COMMISSI	ONER OF REVENUE		PENALTY	
	138 · STANARDSVILLE, VA 22973 34-985-5211 · FAX 434-985-5283		TOTAL DUE	
Date		Walle William Control of the Control	Signature of Applicant	
	PAYMENT FOR YOUR LICE	NSE IS DUE M	ARCH 1, 2017	
licenses are this day several application as indicated by the business for the period show. This license shall not be	e Revenue, do find the foregoing application in ily granted the above named applicant to prose the extension of the taxes thereon, and their pa	ecute the businesses, e ayment as indicated he stil the taxes prescribed	employments or profe ereon, at the above n d by law (and penalti	ssions covered by the foregoing amed definite house or place of es), as shown on the foregoing
Given under my hand th	isday of		20	