



CALENDAR YEAR 2017

BUSINESS LOCATED IN THE TOWN OF LOVETTSVILLE, VA
 BUSINESS, PROFESSIONAL AND OCCUPATIONAL LICENSE TAX ASSESSMENT FORM

PLEASE COMPLETED THE SHADED AREAS BELOW.

OWNER'S NAME	
BUSINESS NAME	
MAILING ADDRESS	
CITY, STATE, ZIP	

BUSINESS INFORMATION

BUSINESS PHONE NUMBER	
EMAIL ADDRESS	
SSN OR FEDERAL EMPLOYER IDENTIFICATION NUMBER	
BUSINESS LOCATION – PHYSICAL ADDRESS	
NUMBER OF EMPLOYEES AT THIS LOCATION	
DESCRIPTION OF BUSINESS ACTIVITIES AT THIS LOCATION	

STATEMENT OF GROSS RECEIPTS AND TAX COMPUTATION

NEW: A copy of Schedule C or appropriate Federal tax filing documentation verifying gross receipts must be submitted with this application.

ROW	CALCULATION	Receipts	Tax Due
A	TOTAL GROSS RECEIPTS FOR CALENDAR YEAR 2016 <i>(If this is a new business, enter estimated gross receipts for 2017)</i>	\$ _____	\$30.00
B	SUBTRACT \$20,000 FROM ROW A	-\$20,000	
C	ADJUSTED GROSS RECEIPTS	\$ _____	
	IF ROW C IS ZERO OR LESS GO TO ROW E, OTHERWISE CALCULATE ADDITIONAL LICENSE TAX ON ROWS D		
D	MULTIPLY ROW C BY 0.0017 (\$0.17/\$100)	\$ _____	
E	TOTAL LICENSE TAX DUE BEFORE MAY 1, 2017 (\$30 FROM ROW A + AMOUNT FROM ROW D)		\$ _____
F	AMOUNT DUE AFTER MAY 1, 2017 (ROW E +10% LATE FEE)		\$ _____

DECLARATION

I DECLARE THAT THE STATEMENTS AND FIGURES GIVEN ARE TRUE, FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNATURE CEO/PARTNER/OWNER/OFFICER

DATE

APPLICATION AND PAYMENT DUE BY **MAY 1, 2017**.
 MAKE CHECK PAYABLE TO TOWN OF LOVETTSVILLE.

TOWN OF LOVETTSVILLE
 ATTENTION: TREASURER
 PO Box 209
 LOVETTSVILLE, VA 20180-0209

FOR OFFICE USE ONLY

2016 LICENSE	
2017 LICENSE	
DATE RECEIVED	
AMOUNT	
DATE ISSUED	
INITIALS	