



LICENSE YEAR 2020

OUT-OF-TOWN CONTRACTORS DOING BUSINESS IN LOVETTSVILLE, VA
BUSINESS, PROFESSIONAL AND OCCUPATIONAL LICENSE TAX ASSESSMENT FORM

Please review the information in the shaded areas below and update as needed.

OWNER
BUSINESS NAME
MAILING ADDRESS
CITY, STATE ZIP

BUSINESS INFORMATION

BUSINESS PHONE NUMBER
EMAIL ADDRESS
SSN OR FEDERAL EMPLOYER IDENTIFICATION NUMBER
CONTRACTOR'S LICENSE NUMBER
BUSINESS LOCATION (Street Address)
(City, State Zip)
PROVIDE A BRIEF DESCRIPTION OF BUSINESS ACTIVITIES AT THIS LOCATION.

STATEMENT OF GROSS RECEIPTS

AMOUNT OF GROSS RECEIPTS ATTRIBUTABLE TO BUSINESS IN LOVETTSVILLE IN 2019
(BUSINESSES NEW TO TOWN USE PROJECTED GROSS RECEIPTS IN 2020) \$

TAX COMPUTATION (PLEASE NOTE CHANGES IN BUSINESS LICENSE TAX HIGHLIGHTED BELOW)

GROSS RECEIPTS BUSINESS LICENSE TAX
\$0.00 - \$25,000.00 \$0.00 (SIGN ATTESTATION STATEMENT BELOW)
\$25,000 AND OVER \$30.00 + \$0.16 PER \$100 OF GROSS RECEIPTS OVER \$25,000.
TOTAL CONTRACTOR LICENSE TAX DUE: \$ + 10% LATE FEE (AFTER 5/1/20): \$
TOTAL AMOUNT DUE: \$

DECLARATION

[ ] I DECLARE THAT THE STATEMENTS AND FIGURES GIVEN ARE TRUE, FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.
OR
[ ] (ATTESTATION) I CERTIFY THAT THIS BUSINESS IS PHYSICALLY LOCATED OUTSIDE THE LOVETTSVILLE TOWN LIMITS AND THAT GROSS RECEIPTS EARNED FROM BUSINESS ACTIVITY WITHIN THE TOWN LIMITS IN 2019 WERE LESS THAN \$25,000.
SIGNATURE CEO/PARTNER/OWNER/OFFICER DATE

BY MAY 1, 2020 RETURN THIS FORM AND CHECK PAYABLE TO:

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

FOR OFFICE USE ONLY

Table with 2 columns: Description, Amount. Rows include 2019 LICENSE, 2020 LICENSE, DATE RECEIVED, AMOUNT, DATE ISSUED, INITIALS.