



OUT OF TOWN CONTRACTORS DOING BUSINESS IN LOVETTSVILLE, VA

CALENDAR YEAR 2011

BUSINESS, PROFESSIONAL AND OCCUPATIONAL LICENSE TAX ASSESSMENT FORM

| | |
|------------------|--|
| BUSINESS NAME | |
| OWNER | |
| MAILING ADDRESS | |
| CITY, STATE, ZIP | |

BUSINESS INFORMATION

| | |
|---|---|
| BUSINESS PHONE NUMBER | |
| SSN OR FEDERAL EMPLOYEE IDENTIFICATION NUMBER | |
| CONTRACTOR'S LICENSE NUMBER | |
| BUSINESS LOCATION (<i>Street Address</i>) | |
| (<i>City, State, Zip</i>) | |
| EMAIL ADDRESS (<i>Please Print</i>) | |
| CLIENT DESCRIPTION | COMMERCIAL / RESIDENTIAL / BOTH / OTHER |
| PLEASE PROVIDE A BRIEF DESCRIPTION OF BUSINESS ACTIVITIES AT THIS LOCATION. | |
| | |

STATEMENT OF GROSS RECEIPTS

| | |
|--|----------|
| TOTAL GROSS RECEIPTS FOR CALENDAR YEAR 2010 <i>(If new business enter estimated gross receipts)</i> | \$ _____ |
| PERCENTAGE OF GROSS RECEIPTS ATTRIBUTABLE TO BUSINESS IN LOVETTSVILLE | _____ % |
| AMOUNT OF GROSS RECEIPTS ATTRIBUTABLE TO BUSINESS IN LOVETTSVILLE | \$ _____ |

TAX COMPUTATION

| | |
|---|---|
| GROSS RECEIPTS | BUSINESS LICENSE TAX |
| \$0.00 - \$25,000.00 | \$0.00 (<i>SIGN ATTESTATION STATEMENT BELOW</i>) |
| \$25,000.00 AND OVER | \$37.50 + \$0.17 PER \$100 OF GROSS RECEIPTS OVER \$25,000.00 |
| TOTAL CONTRACTOR LICENSE TAX 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 2010 WERE LESS THAN \$25,000.00.

SIGNATURE CEO/PARTNER/OWNER/OFFICER _____
DATE

BY MARCH 1, 2011 RETURN THIS FORM AND CHECK PAYABLE TO:

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

FOR OFFICE USE ONLY

| | |
|-------------------|--|
| 2010 LICENSE | |
| 2011 LICENSE | |
| DATE PAID | |
| AMOUNT | |
| LICENSE PROCESSED | |