

**BUSINESS LICENSE APPLICATION
CITY OF POQUOSON, VIRGINIA**

JOSEPH B. COCCIMIGLIO
COMMISSIONER OF THE REVENUE
500 CITY HALL AVENUE, POQUOSON, VA 23662
TELEPHONE (757) 868-3020

LICENSE YEAR

OFFICE USE ONLY

ACCOUNT NUMBER

LEGAL OWNER'S NAME (CORPORATE, PARTNERSHIP OR SOLE PROPRIETOR):		CHECK TYPE OF BUSINESS		
		INDIVIDUAL	PARTNERSHIP	CORPORATION
TRADE NAME:		DATE APPLICANT BEGAN BUSINESS IN POQUOSON		
MAILING ADDRESS:		MAIN OFFICE/HOME PHONE	LOCAL BUSINESS PHONE	
		FAX NUMBER	MOBILE PHONE NUMBER	
BUSINESS LOCATION ADDRESS:		EMAIL ADDRESS		
NAMES OF CORPORATE OFFICERS:				

DETAILED DESCRIPTION OF ALL PROPOSED BUSINESS ACTIVITIES:

NO	CLASSIFICATION	RATE	ESTIMATED GROSS RECEIPTS	LICENSE TAX
1				
2				
3				
4				
5				

FEDERAL ID NUMBER/SOCIAL SECURITY NUMBER*	SIGNATURE	DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>

* Enter Social Security Number ONLY if business does not have a Federal I.D. Number. If an application has been made for a Federal I.D. Number, please submit when received.

Checks made payable to: City of Poquoson. 10% penalty for failure to either file an application or pay the tax by March 1st. An additional 10% penalty may be charged if there is a history of late filing or late payment, when both the application and payment are not received by March 1st.

THIS LICENSE EXPIRES DECEMBER 31, ANNUALLY.