**Town of Lebanon Business License Application**

**P.O. Box 309 For the License Year 2024**

**Lebanon, VA 24266 Account : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone 276-889-7200 Trade Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Name and Mailing Address Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN/FED ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Check one of the lines below \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_ Business \_\_\_\_ Professional \_\_\_\_\_ Contractor \_\_\_\_ Trailer Park \_\_\_\_\_ Food Truck \_\_\_\_ Coin Operated**

 **Machines**

 **\_\_\_\_ Itinerant Merchant \_\_\_\_\_\_ Medical Clinic (If yes are you OPT or OBOT Treatment Facility)\_\_\_\_ Yes \_\_\_ No**

|  |  |  |  |
| --- | --- | --- | --- |
| **Gross Sales** | **Tax** | **Penalty** | **Interest** |
|  |  |  |  |

**\*\*\*IMPORTANT\*\*\***

**YOU MUST ATTACH A COPY OF YOUR PRIOR YEAR’S FEDERAL INCOME TAX RETURN OR APPROVED DOCUMENTATION**

**MAKE A COPY OF THIS FOR YOUR RECORDS AND RETURN WITH PAYMENT**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Applicant or Authorized Agent**

**License**

**I, the Town Treasurer find the foregoing application acceptable: therefore, this license grants the applicant named in the application to prosecute the businesses, occupations, or professions by the application as indicated by the extension of the taxes thereon, and their payment as indicated hereon, at the definite house or place in the Town of Lebanon described in the application, for the period beginning:**

 **Beginning Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and expiring: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This license shall not be valid or have any legal effect until the taxes prescribed by law (and penalties and fees) as shown on the foregoing application and hereon, be paid to the treasurer of the Town of Lebanon, and the fact of such payment appear on the face hereof by the signature of such Treasurer hereto.**

**Approved Date (Total Tax, Penalty & Fees) $\_\_\_\_\_\_\_\_\_\_\_**

**And Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Receipt # \_\_\_\_\_\_\_\_\_\_\_**

 **Check # \_\_\_\_\_\_\_\_\_\_\_**