County of Pulaski
52 W. Main Street, Suite 200
Pulaski, VA 24301
(540) 980-7750
tmearles@pulaskicounty.org

2022 APPLICATION FOR BUSINESS OR PROFESSIONAL LICENSE

Application along with proper remittance must be filed by March 1, 2022

A Penalty of 10% of the License Tax Due, shall be added to the License Tax Due after March 1st.
Interest on Amount Due at the Rate of 10% per Annum must also be added after March 1st.

Please Print or Type
Applicant_____ Individual_____
                                                  Partnership_____
Owner's Name _____Corporation_____

NAME OF BUSINESS _____

MAILING ADDRESS (printed on license) _____

Business Phone _____ **VA Contractor No.** _____

PLACE OF BUSINESS _____

NATURE OF BUSINESS _____

FEDERAL ID # OR SS# _____   **EMAIL** _____

BASIS FOR LICENSE

1.   Business/Profession Operating from January 1, 2021 to December 31, 2021 (or other 12-month period) Provide the actual gross receipts for this period.

Category	Actual Gross Receipts	Amt Due
_____	_____	_____
_____	_____	_____
_____	_____	_____

2.   Business/Profession Operating less than 12 full months between January 1,2021 and December 31,2021. Estimate Gross Receipts for License Year January 1, 2022 to December 31, 2022. Provide Actual Gross Receipts for Prior License Year.
Date Business Commenced _____

Actual Gross Receipts	Category	Estimated Gross Receipts	Amt Due
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3.   Business/Profession Commencing after January 1, 2022. Estimate Gross Receipts to December 31, 2022. Date Business Commenced _____

Category	Estimated Gross Receipts	Amt Due
_____	_____	_____
_____	_____	_____
_____	_____	_____

        I (we) do herby certify that the amount(s) reported as gross receipts from my business or profession as reported as gross receipts from my business or profession as reported herein is true and correct (i.e., gross sales, gross purchases, gross commissions, or other taxable basis under the County's Business, Professional and Occupational Ordinance), and that proper accounting is maintained for verification as may be required.

Sign_____ Sign_____
Applicant   Date   Signature of preparer if other than applicant   Date

Title_____Company_____
**Business owner must comply with all regulations of Pulaski County's Business License ordinance, zoning ordinance, and the Va. State Code. Otherwise, Business License will be null and void.
OFFICE USE ONLY

Account # _____   **Taxes Owed:** _____

**Business Name_____

Amount Paid $_____ **Cash**_____**Check**_____**Ck #**_____