

VILLAGE OF BARBOURSVILLE
P.O. BOX 266
BARBOURSVILLE, WV 25504
304-736-9820

LICENSE FEE \$5.00
PENALTY \$500.00

Visit our website at www.barboursville.org

APPLICATION FOR BUSINESS LICENSE 2007-2008

The applicant declares that a business exists and hereby requests a license.
The following information is requested for a business license.

ALL QUESTIONS MUST BE ANSWERED

Please print or type

Business Name _____

Business Location _____
Street City State & Zip

Business Phone # () Federal ID # _____

Contact: _____ Fax # () _____

Owner _____ E-mail address: _____
(Full Name of Owner; Partners; or Corporate Title)

Mailing Address _____
(Complete only if different than Business Location)

Business Tax Dept. Phone # () Social Security # _____

Exact Date Business Started (IN BARBOURSVILLE) _____

FORM OF BUSINESS _____ Individual _____ Partnership* _____ Trust
_____ Corporation _____ Association _____ Joint Venture

*If Partnership, Furnish Names and Addresses of All Partners on Reverse Side

Furnish DETAILED description of nature of business: (Be Specific) _____

Did you purchase your business? _____ NO _____ YES**

**IF "YES", GIVE PREVIOUS OWNER'S TRADE NAME, INDIVIDUAL'S NAME & ADDRESS ON REVERSE SIDE OF THIS APPLICATION

I DECLARE UNDER PENALTY OF PERJURY THAT TO MY KNOWLEDGE, ALL INFORMATION
IN THIS STATEMENT IS TRUE AND CORRECT.

APPLICANT'S SIGNATURE: _____

TITLE: _____ DATE: _____

FOR OFFICE USE ONLY	
BUSINESS # _____	RECEIPT # _____