

**2020 City of Winchester
 Business License Application
 (See Reverse for Instructions)**

CONTROL NUMBER

Due Date March 2, 2020

File and pay by due date to avoid a penalty.

Part 1 Business Information

Trade Name	Owner Name	Telephone Number	
Mailing Address	City	State	Zip
Business Address			
Email Address	State ID Number	Federal ID No./Social Security No.	
Type of Business:	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC		
Date Business Began in Winchester	Date Closed (if applicable)		

Part 2 Contractors (Copy of State License and VWC Certificate of Workers' Compensation Insurance Acknowledgment must be included. Check here if enclosed.)

State Contractor's License Type: (Check One) Class A Class B Class C Classification: _____

Enter State Contractor's License Number: _____ Expiration Date: _____

Part 3 Financial Information (Gross Receipts)

Business Type	Enter Prior Year Gross Receipts (2019)	If Business Began After January 1, 2019, Enter Estimated Gross Receipts (2020)	If Including Payment, Enter Amount Enclosed	FOR USE BY COMM OF REVENUE	
Contractor					
Retail Sales					
Repair, Personal and Business Services					
Financial, Real Estate and Professional Services					
Wholesale Merchants * (*Report Gross Purchases)					
Other Types of Businesses					

Part 4 Alcoholic Beverages (If your business does not sell alcoholic beverages, check here.)

Are mixed beverages sold on the premises? (Check One) Yes No

What is the maximum seating capacity? (Check One) 1 - 100 101 - 150 151+

Do you sell Beer and/or Wine? (Check All That Apply)

Beer: On Premises Only: Yes No Off Premises Only: Yes No Both: Yes No

Wine: On Premises Only: Yes No Off Premises Only: Yes No Both: Yes No

Part 5 Local Excise Taxes

Are any sales subject to the following? (Check All Applicable) Meals Tax Lodging Tax Admissions Tax Short-Term Rental Tax

Part 6 I hereby swear or affirm that all the information listed above is true and correct to the best of my knowledge.

Signature	Printed Name	Title	Date
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