Town of Belle

APPLICATION FOR BUSINESS LICENSE

For Fiscal Year Ending June 30, _____

DO NOT WRITE IN SHADED AREAS

These blocks must be fully completed if a change has been made during the past year

Previous Name of Business			Date Purchased
Previous Owner of Business			Kind of Business
SEE "IMPORTANT NOTICE" At BOTTOM FOR ADDITIONAL FILING INSTRUCTIONS	NAME OF BUSINESS, OWNERSHIP, LOCATION AND MAILING ADDRESS		Date Issued
LICENSE NO.			**Do not Staple or Mutilate**

APPLICATION FEE FOR			AN URGENT MESSAGE
Please Indicate By Check Below	LICENSE AND FEES	$ 5.00	"Any person who establishes, operates or maintains a store, contracts as a vendor or any business other than a building contractor without obtaining a license therefore or continues to operate the same after the termination of a license therefore shall, in addition to paying the license tax, be subject to a penalty of ten percent of such license lax for each month or part thereof during which he had been in default."
___General License	PENALTY		
___Special	_____Decals @_____		
___Other Vendor License	**TOTAL REMITTANCE**	$ 5.00	

IMPORTANT NOTICE

It is absolutely necessary that the information requested below be provided so that your business can be properly classified and the license fee determined.

Please indicate by check in block or insertion in proper space:

_____ I/We sell cigarettes _____I/We sell soft drinks _____I/We sell tobacco products

_____I/We sell beer _____I/We sell wine _____I/We have pool tables _____ Number

_____I/We have Washers _____ Number Dryers _____ Number

I/We have_____ one-cent devices operated in our business
Number

I/We have _____coin devices in excess of one-cent operated in our business
Number

I hereby declare that the statements contained in this application are made under the penalties of perjury.

_____ _____
Name of Applicant, Official Title or Capacity Telephone Number

Do Not Write in this Space

PO Box 697, 1100 E. Dupont Ave., Belle, WV 25015