

Period: _____
 Location: _____
 (actual location, not p. o. box or mailing address)

Name of Business: _____

Mailing Address: _____

Telephone Number: _____
 If you sold or otherwise discontinued business in Kenova, please provide the date: _____
 If sold, please provide name and address of buyer: _____

FIN or SSN	Form of Business
	Individual
	Corporation
Date Business Began in City of Kenova	Partnership
	Association
	Trust
	Other

Item Classifications	Total Gross Value/Income	Non-Taxable (Explain Below)	Total Taxable Gross Value/Income	Rate Per \$100	Amount of Tax
Production of coal and other natural resource products (gross sales value) Coal, limestone, sandstones, blast furnace slag, sand, gravel or other mineral products, natural gas (\$1,250.00 quarterly exemption), timber and other natural resource products				.20	
Manufactured, compounded or prepared products (gross sales value)				.30	
Selling real or tangible property (ex. retailers, restaurants) (gross income)				.30	
Wholesalers of real or tangible property (gross income of business)				.15	
Water companies, electric light and power companies (sales and demand charges for domestic purposes and commercial lighting)				4.00	
Electric light and power companies (sales and demand charges for all other purposes), natural gas companies, toll bridge companies, and all other public service or utility businesses				3.00	
Contracting (gross income of business, including total labor and materials)				1.50	
Amusements and entertainment (gross income of business)				.50	
All services and other business or callings (gross income of business)				.30	
Rents, royalties, fees or otherwise to furnish any property (gross income)				.30	
Small or industrial loans, banking or other financial business (gross income)				.60	

TOTAL AMOUNT OF TAX

This completed form and payment of tax due must be delivered to the City Clerk/Treasurer within one month of end of covered tax quarter. Penalty for late filing or late payment is 5% of amount of tax due. Thereafter, additional penalty of 1% for each succeeding month, or fraction thereof.

5% Penalty

1% Penalties

Mailing address: Post Office Box 268, Kenova, WV 25530

TOTAL PAYMENT DUE

I, the undersigned, do hereby declare that the above estimate of tax due was made from the records of the taxpayer, and it is believed to be a close approximate of the actual tax due.

****If you have renewed, please do so. If you have questions, please contact us at 304-453-3121.**

Owner/Officer Signature and Title

(Date)

Check One					
Sole Proprietor	Partnership	LLC	Corporation	Trust	Other

Property Address	No. of Units	Business		Check One That Applies	
		Business	Residential	City Refuse	Dumpster
<i>Example: 725 B Street</i>	<i>10</i>		X		X

Information	
Owner's Name:	_____
Home Address:	_____
Phone: (Mobile)	_____ (Home) _____
Applicant Name:	_____ Email: _____
Applicant Signature:	_____

Payment Information	
CASH	CHECK NO.
<p>Make checks payable to: CITY OF KENOVA</p>	
<p>Show Amount Paid:</p> <p>\$ _____</p>	

B&O Tax Returns are due no later than:
 April 30 – July 31 – October 31 – January 31

Forms are available online at kenovawv.com.

Any questions related to this application or questions regarding required documentation should be directed to the email dmatney711@gmail.com or by phone to the City offices at (304) 453-3121.

office use only

Contractor's License
Liability Insurance Cert.
WV Business Reg. Cert.
B&O Database
Completed By: _____
Date Issued: _____

BUSINESS LICENSE CATEGORY

To complete the
 Fee Schedule, click on the
 icon for each license category on the page.

CHECK APPLICABLE LICENSE CATEGORY:		CONTINUED	
General Business License	\$15.00	Mobile Home Courts (initial permit) each mobile home	\$25.00
Billard or pool:		Mobile Home Court (annual renewal) each mobile home	\$5.00
First table	\$25.00	Pawn brokers	\$100.00
Each additional table	\$15.00	Junk Dealer, resident within city limits	\$25.00
Amusement or music devices		Insurance Company	\$50.00
1 device	\$2.00 each	Insurance Broker or Agents (per broker or agent)(\$25.00
2-5 devices	\$5.00 each	Chiropractors	\$25.00
6-10 devices	\$10.00 each	Medical corporation	\$300.00
11 or more devices	\$12.50 each	Dentists/Dental Corporation each	\$50.00
Laundromats or car washes:		Hawker/Peddler on foot	\$10.00
1-5 devices	\$15.00	Hawker/ Peddler in vehicle	\$15.00
6-9 devices	\$3.00 each	Itinerant Vendor	\$500.00
10 or more devices	\$30.00	Collection agency	\$100.00
Vending machine, merchandise or service device:		Employment Agency	\$200.00
1 device	\$2.00 each	Embalmers / Funeral Directors	\$15.00 each
2-5 devices	\$5.00 each	Funeral Establishments / Crematories	\$75.00
6-10 devices	\$10.00 each	Private Club	
11 or more devices	\$12.50 each	Less than 1,000 Members	\$575.00
Architects	\$25.00	More than 1,000 Members	\$1,250.00
Attorney	\$5.00	Fraternal, Veterans, or Non-Profit Social Club	\$375.00
Barbers, beauticians	\$25.00	Beer	
Engineers	\$30.00	Brewery	\$1500.00
Hearing aid fitters and dealers	\$40.00	Distributor	\$1000.00
Hotels, motels, boardinghouses:	\$2.00	Class A (Restaurants, bars and fraternal organizations)	\$150.00
Each bedroom in excess of 7	\$.25 each up to 10.00	Class B (grocery Store) (chilled and unchilled)	\$150.00
Nursing homes	\$300.00	Equine Retail Outlet	
Contractor License	\$55.00	Store – Liquor License	\$1,000.00
		Wine	
CONTRACTORS MUST ATTACH A COPY OF WV CONTRACTOR'S LICENSE AND CERTIFICATE OF GENERAL LIABILITY INSURANCE WITH THE CITY OF KENOVA LISTED AS CERTIFICATE HOLDER		Retailers (grocer)	\$150.00
		Distributors (wholesale)	\$2500.00
		ATTACH COPY OF WV ABC LICENSE	



BUSINESS LICENSE APPLICATION

City of Kenova
P. O. Box 268 | Kenova, WV 25530
Phone: (304) 453-3121 FAX (304) 908-1127
www.kenovawv.com

BUSINESS	
Business Name:	
Business Federal Tax ID No.:	Last 4 digits of SS No. (If no Federal Tax ID No):
Business Owner's Name:	Beginning Date of Business in Kenova:
Business Phone No.:	WV State Tax Department Business Registration Acct. No.:
Business Physical Location:	
Business Mailing Address if different from physical location:	
Contact Person for Tax & License Purposes:	
Business Phone No.:	Contact Phone No./Ext.:
Contact Email:	
Give a brief description of your business activity:	