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**Town of Glasgow**

**PO Box 326**

**Glasgow VA 24555**

**(540) 258-2246**

**Application for Business License**

**Name of Business:**

**Mailing Address:**

**Street Address:**

**Phone Number:**

**Type of Business:**

 **Gross Receipts\* Tax Due**

**Business/Occupation Classification Tax Rate** (if none, enter 0)(if none, enter 0)

For contracting and persons contracting for $.10

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_**

their own account for sale. per $100

 Gross Receipts

For retail sales. $.13

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 per $100

 Gross Receipts

For financial, real estate, and professional $.38

services. per $100

 Gross Receipts

For repair, personal and business services, and $.23

all other businesses and occupations not per $100

specifically listed or expected above. Gross Receipts

 Add the three “tax due”

**\*Gross Annual Receipts**

**\_\_\_\_\_\_\_\_\_\_\_**

 amounts and enter the total

 in the box to the right.

Every person or business subject to licensure under the Town

Ordinance shall be assessed and required to pay annually a **Total Tax Due**

**$\_\_\_\_\_\_\_\_\_**

license fee of $30.00 or the applicable tax determined using Enter the Total from the box

the rates shown above, which is higher. above or $30.00, whichever

 is greater, plus a 10% penalty

 if submitted after May 1st.

 ***Please make checks payable to the Town of Glasgow and remit to the above address.***

Application submitted by: (printed name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use: Delinquent PP/RE Taxes Paid Current PP/RE Taxes Paid**

 **Yes No Yes No**