



Thomas A. Hazelwood
 Commissioner of the Revenue
 P.O. Box 1459
 Suffolk, VA 23439-1459
 ADDRESS SERVICE REQUESTED

2012

Main Office (757) 514-4252 Branch Office (757) 514-7182
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Renewal Application
for
CITY OF SUFFOLK BUSINESS LICENSE

RENEWAL APPLICANTS MUST FILE AND PAY ALL TAXES DUE BY
MARCH 1st

Business Address	
Date business began in Suffolk	
Social Security #	
FEIN	
Phone	
Fax	
Cell	

Type of License	Fee	Rate per \$100.00	Type of License	Fee	Rate per \$100.00

If gross receipts exceed \$100,000.00, apply tax rate to ALL receipts. If gross receipts are less than \$100,000.00, enter your gross receipts and pay fee only. Alcoholic beverage license: pay fee only (include gross receipts in retail merchant license).

Note: Provide 2012 estimated gross receipts ONLY if business began in 2011 or business is a Non-Suffolk contractor

	CODE	TYPE OF LICENSE	2011 Actual Gross Receipts Jan 1-Dec 31	2012 Estimated Gross Receipts Jan 1-Dec 31	TAX or FEE	TOTAL
1						
2						
3						
4						
5	Complete the worksheet on reverse side ONLY ■ If the business began after January 1, 2010 and gross receipts exceeded \$100,000. ■ If the business is a non-Suffolk contractor and gross receipts exceeded \$100,000.					Prior Year Adjustment
						* Penalty 10%
*Penalty will be applied if not paid by March 1.						
TOTAL TAX DUE						\$

I hereby certify that the information presented on this statement is complete and accurate.

Authorized Signature _____ Printed Name/Title _____ Date _____ Phone # _____

Email: _____

If no longer engaged in business in the City of Suffolk, please check the box. Date closed: _____

