MUNICIPAL LICENSE APPLICATION

CITY OF ELKINS

401 Davis Avenue, Elkins WV 26241
Phone (304) 636-1414 FAX (304) 635-7135

Please Print or Type

OFFICIAL USE ONLY

Fiscal Year _____

License No. _____
New _____ Renewal _____
License Fee $_____
Date Issued _____

FULL NAME OF BUSINESS:_____

CORPORATION NAME: (if applicable)_____

BUSINESS PHYSICAL ADDRESS: (Do not use PO Box) _____

MAILING ADDRESS: _____

BUSINESS PH # _____ CELL PH #_____ OWNER'S HOME OR CORPORATE HEADQUARTERS PH # _____

TYPE OF BUSINESS ENTITY: __ **Individual** __**Partnership** __**Corporation** __**LLC** __**Other** _____

BUSINESS CLASSIFICATIONS: (Check all that apply)

__ MANUFACTURING __ RETAIL __ WHOLESALE __ SERVICE __ UTILITY __ BANKING OR OTHER FINANCIAL INSTITUTION __ AMUSEMENT
__ RENTAL (Residential Property) __ RENTAL (Commercial Property) __ RENTAL (Other Type - Specify)_____ __ OTHER (Describe) _____

MUNICIPAL LICENSE REGISTRATION FEE: $20.00 **__ NOT FOR PROFIT (provide IRS determination letter)**

BEER, WINE, LIQUOR (must provide copy of West Virginia license from ABCC (license fees, as follows)

__	BEER (Distributor)	**$ 250.00**	__	PRIVATE CLUB (Non-Profit Fraternal)	**$375.00**
__	BEER (Dispenser)	**$ 100.00**	__	PRIVATE CLUB (less than 1000 members)	**$500.00**
__	BEER (Private Club)	**$ 50.00**	__	PRIVATE CLUB - RESTAURANT	**$300.00**
__	BEER (Retailer/Package)	**$ 5.00**	__	RETAIL LIQUOR SALES - CLASS A	**$1,500.00**
__	WINE (Retail)	**$ 150.00**	__	RETAIL LIQUOR SALES - CLASS B	**$500.00**
__	WINE (Distributor)	**$ 500.00**			

TOTAL FEE FOR ALL CATEGORIES CHECKED $_____

NOTICE: Your license will expire June 30th. Failure to secure new license on or before July 1 may result in a $50.00 penalty for each month delinquent, or fraction thereof.

List Names of all Owners, Partners, or Corporate Officers: (Use separate sheet of paper if necessary)

Name	Title	Home Address	Social Security # (last 4 digits only)	Home / Cell Phone #
1._____	_____	_____	_____	_____
2._____	_____	_____	_____	_____
3._____	_____	_____	_____	_____

Date Business Began or Will Begin in Elkins: _____ (**Must Attach Copy of WV Business Certificate/WV Contractor's License**)

Do you or will you own the structure where your business is conducted? _____Yes _____No
If no, give name, address and telephone number of owner _____

DESCRIBE THE BUSINESS ACTIVITY, THE TYPE OF PRODUCT SOLD OR SERVICE OFFERED, AND THE SPECIFIC LOCATION OR AREA/S WITHIN THE CITY LIMITS WHERE BUSINESS ACTIVITY WILL BE CONDUCTED (if applicable). MUST BE COMPLETED IN DETAIL LISTING ALL ASPECTS OF YOUR BUSINESS.

_____

_____

Complete the section below if the business activity for which you are requesting a license involves property that you rent to others. (Use separate sheet of paper if necessary)

Address of Rented Property	Commercial or Residential	Current Tenant's Name	Estimated Annual Rental Income	Date Rented
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

_____ / _____ / _____ / _____
SIGNATURE OF APPLICANT PRINT NAME TITLE DATE