

PRINT OR TYPE NAME AND TITLE OF PERSON SIGNING

# **CITY OF FAIRFAX**

### WILLIAM PAGE JOHNSON, II

Commissioner of the Revenue

City Hall, Room 224 • 10455 Armstrong Street • Fairfax, Virginia 22030 Phone (703) 385-7880 • FAX (703) 359-2499 • e-mail: Revenue@fairfaxva.gov



## **BUSINESS LICENSE APPLICATION**

**DUE WITHIN 30 DAYS OF STARTING BUSINESS** 

FEDERAL I.D. OR SOCIAL SECURITY NO.

LICENSE NUMBER

DATE BUSINESS BEGAN

APPLICANT'S NAME						INDIVIDUAL	□ c	ORPORATION	
TRADE NAME (if any)						PARTNERSHIP	- A	SSOCIATION	
MAILING ADDRESS					BUS. TEL. NO				
CITY / STATE / ZIP CODE					BUS. FAX NO				
BUSINESS LOCATION					E-MAIL				
NATUR	E OF BUSINESS	.11							
	U RENT OR LEASE THESE BUS								
(IF YES, FURNISH NAME AND ADDRESS OF LANDLORD OR LESSOR.) MAILING ADDRI					ESS				
AMOUN	NT OF ANNUAL RENT \$		CITY / STAT	E / ZIP COD	)E				
LINE	SERVICE DESCRIPTION		INSTRUCTIONS		GROSS REC		RATE JMN B	TOTAL TAX COLUMN C	
1		Enter estimated 2024 Gross Receipts on Line 1 Column A Enter rate (see schedule) on Line 1 Column B. Multiply Line 1 Column A by Line 1 Column B and enter recon Line 1 Column C.				V A GOLO		COLONINO	
2		For License based on Flat Rate (see schedule) enter on Line 2 Column C.							
3									
4									
5									
6									
7									
OATH: I, THE UNDERSIGNED APPLICANT DO SWEAR (OR AFFIRM) THAT THE FOREGOING FIGURES AND STATEMENTS ARE TRUE, FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.					SUBTOTAL: PENALTY:				
					INTEREST:				
SIGNATURE OF APPLICANT DATE					TOTAL AMOUNT DUE:				
PRINT C	OR TYPE NAME AND TITLE OF PERSON SIGNING		PHONE NUMBER			T REPORT (		RECEIPTS *	

# GENERAL INSTRUCTIONS FOR FILING THE BUSINESS LICENSE APPLICATION PLEASE READ THE ENTIRE PAGE BEFORE FILLING OUT

#### **Completion of Forms**

All information requested on the tax form is important to the proper and equitable assessment of the tax involved. Therefore, it is required that each tax form be fully completed.

#### **Corporations**

If your Business is a corporation, a copy of the most recent **Annual Report** filed with the Virginia State Corporation Commission is **required**. If your business is a new corporation a copy of your **Certificate of Incorporation** filed with the Virginia State Corporation Commission is **required**.

#### **Allowable Deductions from Gross Receipts**

- Gas Station's State, Federal and Metro Excise Taxes
- Automobile Dealer trade-ins
- Contractor's gross receipts paid to other localities

#### SPECIAL NOTICE TO BUSINESSES WITH GROSS RECEIPTS OF LESS THAN \$50,000 PER YEAR

**Section 14-33** of the City of Fairfax Business License Ordinance has been amended to read:

"No license tax shall be imposed on any person whose **gross receipts** are less than **\$10,000** for the immediately preceding year from a business, profession or occupation subject to licensure.

A license tax shall be the **lesser of \$30.00** per year or the license tax computed on any person whose gross receipts are between **\$10,001** and **\$50,000** for the immediately preceding year from a business, profession or occupation subject to licensure."

Please note, **Sec. 14-35** requires "An application for a license **must** be **filed** in accordance with this chapter **regardless** whether a license tax is due or the license tax is not applicable to a business, profession or occupation."

#### Filing and Payment DEADLINES and PENALTIES

Business License Application Forms are due with payment on March  $\mathbf{1}^{st}$  or within 30 days of starting business.

A penalty of **ten percent (10%)** of the License Tax will be imposed upon the failure to file an application or the failure to pay the tax by the due date. **Interest** shall be charged on the late payment of the tax from the due date until the date paid at a rate established pursuant to Section 6621 of the Internal Revenue Code of 1954, as amended.

**TAX DEADLINES ARE STRICTLY OBSERVED AND PENALTIES ARE ENFORCED.** Therefore, please file and pay your business license renewal **timely** to **avoid penalties.** The filing date on mailed application will be the postal postmark thereon.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE COMMISSIONER OF THE REVENUE'S OFFICE AT (703) 385-7880.