



# 2016 BUSINESS LICENSE

## DUE MARCH 1

## CONTRACTOR

January 1, 2016 – December 31, 2016

Workers Comp. Insurance Form Required

GOOCHLAND, VIRGINIA  
COMMISSIONER OF THE REVENUE  
(804) 556-5807

VA State Registration Number

**INSTRUCTIONS:** Type or Print providing all information requested below. Return with check payable to "Goochland County." A copy of this license will be returned to you once it is certified and signed by the Commissioner. For assistance call (804) 556-5807 or hearing impaired dial 711 (Va Relay) [www.goochlandva.us](http://www.goochlandva.us) click on Your Government; Taxes; Commissioner of the Revenue. **Renewal business licenses must be filed and paid by MARCH 1.**

Licensee:				
Name:		Description of your business		
Mailing Address:				
Mailing Address 2:		Physical Address:		
City, State, Zip:				
<b>Bs classification: CONTRACTOR</b>		<b>Rate: .10 PER \$100 OF GROSS RECEIPTS</b>		
Telephone Number				
<b>County License #</b>	FEDERAL ID OR SSN	<b>Contractors VA State Registration Number</b>		
		Need # and Updated Expiration Date		
				EXP: _____
Date business will begin (or began) in Goochland / /			Individual ___ Partnership ___ Corp ___ LLC ___ Other ___	
Zoning approved ___ disapproved ___			Zoning comments	
Zoning official:			Date:	
License Classification (office use only)	Prior Year Gross Receipts or Estimation for new business	Tax Rate	License Tax Due	Payment type
<b>CONTRACTOR</b>		<b>X .001</b>		CHECK #
<b>10% penalty</b>	<b>After March 1 on renewals</b>			
<b>Total License Tax Due *Minimum \$25*</b>		<b>OUT OF COUNTY CONTRACTOR'S WITH GROSS RECEIPTS UNDER \$25,000.00 DO NOT</b>		
<b>Unless Out of County Contractor &gt;&gt;&gt;</b>		<b>NEED TO PAY A FEE. Please call to FLAG your license in the system</b>		

I, the undersigned, hereby certify under penalty of perjury, that the information provided herein and above is true and correct to the best of my/our knowledge and belief:

\_\_\_\_\_  
Signature of Applicant for License Date: \_\_\_\_\_

\_\_\_\_\_  
Commissioner of the Revenue Treasurer of Goochland  
**License must be signed by Commissioner of the Revenue to be valid.**  
Mail back to: Commissioner of the Revenue, PO Box 60; Goochland VA 23063 1800 Sandy Hook Road Room 230, Goochland, VA

----- For convenient Pocket Size License – Cut Here -----

Licensee:	
Trade Name:	Description of your business
Mailing Address:	Contractor
Mailing Address 2:	Physical Address:
City, State, Zip:	
<b>Bs classification: Contractor</b>	<b>Rate: .10</b>
Telephone Number:	<b>County License #</b>

Commissioner Validation Signature: \_\_\_\_\_

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### **LICENSE FEE SCHEDULE**

ANY BUSINESS THAT HAS ANNUAL GROSS RECEIPTS OVER \$4,000.00. THE FEES WILL BE ASSESSED USING THE FOLLOWING RATES. **THERE IS A MINIMUM FEE OF \$25.00**

<b><u>License Classification</u></b>	<b><u>Basis</u></b>	<b><u>Rate Factor</u></b>	<b><u>Minimum Tax</u></b>
In County Contractor \$25.00	Gross Receipts	.0010	
OUT OF COUNTY Contractors	Gross Receipts over \$25,000 in Goochland	.0010 per \$100	

### **ADDITIONAL INSTRUCTIONS**

- If your business does not fit one of the above classifications or if you have any questions concerning your license classification, please call (804) 556-5807.
- If you are a contractor and your business location is in Goochland County and you have not had a prior year license in Goochland you must fill out and attach a Zoning Compliance before the license can be issued. Out of County Contractors do not need a Zoning compliance. This form can be obtained from the Planning Office at (804) 556-5860.
- Renewal applications and payments must be received or postmarked on or before **March 1, 2016** to avoid late charges. **Make checks payable to: TREASURER, Goochland County.**
  - [www.goochlandva.us](http://www.goochlandva.us) click on *Your Government; Taxes; Commissioner of the Revenue.*