

Ashland

VIRGINIA

Business License Instructions Town of Ashland, Virginia

All businesses located within the Town of Ashland are required to have a town business license. Each year the license is calculated upon gross receipts (or gross purchases for a wholesale merchant). Any business with gross receipts of less than one thousand dollars (\$1,000.00) shall be required to file an application but will be exempt from the license fee. **New applications pay the simple fee of \$30.00 for the license.**

Applications for new businesses will be reviewed by the Planning Department to ensure that the business location is properly zoned prior to license being issued. The Planning Department may be contacted at **804-798-1073** between the hours of **7:30 a.m. - 6:00 p.m. Monday through Thursday** or at planning@ashlandva.gov.

Contact the State Corporation Commission (804-371-9733 or sccfile@scc.virginia.gov) if you will be operating a business under an assumed or fictitious name. Trade names that include the sole proprietor's last name do not have to be recorded. Trade names using only an individual's initials or any other fictitious names, which differ from the actual sole proprietor, partnership, LLC, or corporate name must be recorded with the SCC. Code of Virginia 59.1-74 requires proof of recordation before a license may be issued.

***All the forms for the Business License are available on the Town of Ashland website on the Finance Department page as fillable forms for your convenience.** www.ashlandva.gov

If you have any questions, please contact the Town of Ashland's Finance Department by email at finance@ashlandva.gov or by telephone at **804-798-8650**.



Finance Department

121 THOMPSON STREET
PO BOX 1600
ASHLAND, VIRGINIA 23005-4600
finance@ashlandva.gov
Telephone: (804) 798-8650
Fax: (804) 798-4892

Business License Form

Type of Application: **NEW BUSINESS**

Business/Corporation Name: _____

Trading As: _____

Business Mailing Address: _____

Business Physical Address (if different): _____

Primary Email Address: _____ Website: _____

Owner's Name: _____

Owner's Address: _____

Business Type: _____ Start Date: _____ Home Based Yes No

Business Category: Food Service Retail Professional/Service Industrial

Other _____

Telephone: Primary _____ Cell _____

FEIN/SSN: _____ NAICS code _____

Business Structure: Sole Proprietor Partnership Corporation LLC Other _____

New Business License Fee	\$30.00
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MAKE CHECK PAYABLE TO "TOWN OF ASHLAND"

CERTIFICATION OF LICENSEE

I CERTIFY THAT THE FOREGOING STATEMENTS AND FIGURES ARE TRUE, FULL, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Printed Name: _____

Signature: _____

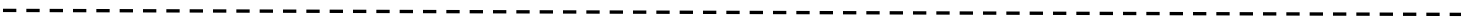
Title: _____ Date: _____



Zoning Review for New Business

Business/Corporation Name: _____

Trading As: _____



OFFICE ONLY

ZONING REVIEW	
GPIN# _____	
Current Zoning: _____	
Proposed Use:	
Additional Comments:	
APPROVED DENIED	
Signature _____	
Date: _____	