

LOUISA COUNTY APPLICATION FOR CONTRACTORS LICENSE

For period beginning _____, 20____, and ending _____, 20____

APPLICANT: _____
Print or Type

ADDRESS: _____
Number and Street or Rural Route

City, Town or Post Office _____ State _____ Zip Code _____

TRADING AS: _____
 Individual Partnership Corporation (Check one)

CLASS A _____ CLASS B _____ CLASS C _____
Number Number Number

Attach copy of Virginia License.

Gross amount of all orders or contracts accepted in 20____.

GROSS RECEIPTS
\$ _____

OATH - I, the undersigned applicant, do swear (or affirm) that the foregoing statements are true, full and correct to the best of my knowledge and belief.

Sworn (or affirmed) to before me this _____ day of _____ 20____. _____
Signature of Applicant for License

This name must be the same as that given at the top of this application. If the application is signed by an authorized agent of the applicant, insert signature below:

Signature of commissioner of the revenue, her deputy or a notary public or other office administering oath.

By _____
Authorized Agent

LICENSE

I, the Commissioner of the Revenue, do find the foregoing application in due form. Therefore, Licenses are this day severally granted the applicant, named in the application to prosecute the businesses, employments, or professions covered by the application as indicated by the extension of the taxes thereon, and their payment as indicated hereon, at the definite house or place in Louisa County described in the application,

for the period beginning _____, 20____, and expiring _____, 20____.

This license shall not be valid or have any legal effect unless and until the taxes prescribed by law as shown on the foregoing application and hereon, be paid to the treasurer of Louisa County, and the fact of such payment appear on the face hereof by the signature of such treasurer hereto.

Date Signed _____
Commissioner of the Revenue
 Date Signed _____
Treasurer

Taxes prescribed by law	\$ _____
Total Fee	\$ _____