



**City of Richmond, Virginia**  
 Division of Collections  
 900 East Broad Street, Room 102  
 P.O. Box 26505  
 Richmond, VA 23261-6505

**APPLICATION FOR CITY OF  
 RICHMOND BUSINESS LICENSE  
 FORM BLR-17**

**LICENSE YEAR 2017**

**Account #**

**IMPORTANT: Renewal application must be filed  
 and taxes and/or fees paid in full by 3/1/2017.  
 Your 2016 license expired 12/31/2016.**

**This license must be surrendered upon demand.**

**INSTRUCTIONS:**

- Type or print only.
- Provide complete information.
- Sign in the space provided at the bottom of the application.
- Return with check payable to "City of Richmond".
- A 2017 business license will be returned to you.
- For assistance call (804) 646-7000.
- For information or forms, visit our website at [www.richmondgov.com](http://www.richmondgov.com).

**IMPORTANT — PLEASE READ:**

- Up to 10% penalty will be added (subject to a minimum penalty) if payment is not postmarked or received by the Department of Finance on or before **March 1, 2017**.
- Your business must be properly zoned before you may begin operating (Zoning phone no. (804) 646-6340).
- All trade / assumed names must be registered with the Clerk of the Circuit Court before the license can be issued (Clerk's phone no. (804) 646-6530).
- If gross receipts for 2016 were \$100,000 or more, please see reverse.
- You will receive a separate renewal form for each line of business or charge on your account (i.e. Restaurant, Beer & Wine and Mixed Beverage will produce 3 renewal forms).

**APPLICANT NAME AND MAILING ADDRESS:**

<b>TELEPHONE:</b>	<b>FAX:</b>
<b>EMAIL ADDRESS:</b>	
<b>EMPLOYER NO. OR S.S. NO.:</b>	
<b>RICHMOND CITY BUSINESS ADDRESS:</b>	
<b>COMPANY:</b>	
<b>TRADE NAME:</b>	
<b>PRESIDENT:</b>	
<b>REGISTERED AGENT:</b>	
<b>NO./STREET:</b>	
<b>CITY/STATE/ZIP:</b>	
<b>TELEPHONE:</b>	

**2016 – LICENSE TAX ADJUSTMENT – 2016**

**CALCULATE ADJUSTMENTS ONLY IF YOUR BUSINESS BEGAN AFTER JANUARY 15, 2015**

Account Number:

BUSINESS TYPE DESCRIPTION	2016 ACTUAL GROSS RECEIPTS	TAX RATE	2016 TAX DUE <b>A</b>	2016 TAX PAID <b>B</b>	TAX DUE / (REFUND) <b>A - B</b>
	<b>.00 X</b>	<b>=</b>			

<b>DATE BEGAN BUSINESS IN RICHMOND:</b> MM DD YY	<b>CERT OF OCCUPANCY NUMBER:</b>
<b>DATE CEASED BUSINESS IN RICHMOND:</b> MM DD YY	<b>CHECK ONE:</b> <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PART. <input type="checkbox"/> CORP. <input type="checkbox"/> LLC
<b>SSN OR FED ID#:</b>	<b>VA SALES TAX #:</b>
<b>LICENSE PREPARER OTHER THAN LICENSEE:</b>	<b>TELEPHONE #:</b> ( ) -
	<b>FAX #:</b> ( ) -

**2017 – CITY OF RICHMOND – 2017  
 BUSINESS, PROFESSIONAL, & OCCUPATIONAL LICENSE**

Account Number:

CAT	TYPE	ABC#	BUSINESS TYPE DESCRIPTION	2016 GROSS RECEIPTS	TAX RATE	AMOUNT DUE
				<b>.00 X</b>	<b>=</b>	

<b>LICENSEE:</b>	<b>AMOUNT</b>
	<b>PENALTY</b>
<b>T/A:</b>	<b>INTEREST</b>
	<b>TOTAL</b>
	<b>AMOUNT PAID</b> ↻

**THE INFORMATION PROVIDED IS TRUE AND COMPLETE. I UNDERSTAND MY OBLIGATION FOR THIS LICENSE. BUSINESS LICENSE RECEIPTS ARE SUBJECT TO AUDIT.**

Date \_\_\_\_\_ Phone \_\_\_\_\_ Printed Name \_\_\_\_\_ Signature (Required) \_\_\_\_\_