



PO Box 130, Hamilton, VA 20159-0130
Phone (540)338-2811 • Fax (540)338-9263
E-mail: hamilton.va@comcast.net

- Renewal Application
New Business (1st Application)
Ceased Operation in Hamilton (Only fill in Name & pg. 1 last section)

Renewal application & tax due on or before: March 1, 2016
Late filings subject to 10% penalty

Business Information

Business/Trade Name

Physical or JOB Location in Hamilton

Business/Mailing Address (if different from Hamilton location)

Bus Phone Fax E-mail

Detailed Description of All Business Activity

Federal ID Number/Social Security Number

VA Contractor License (Class A or B) # (if applicable)

Business Start Date in Hamilton # of Employees at Hamilton location

Business Hours of Operation

Business Owner Name(s)

Home Address of Owner(s)

Owner Cell # Owner Home # Owner Email

Type of Ownership Sole Proprietor Partnership LLC Corporation Other

Is this a home based business in Hamilton? Yes No (If yes, furnish Home Occupation Permit - new applications only)

Do you own the Hamilton Business Location? Yes No (If yes, furnish Certificate of Occupancy - new applications only)

Do you Lease the Hamilton Business location? Yes No (If yes, furnish landlord information below)

Landlord Name Annual Rent Paid: \$

Mailing Address City State Zip

Ceased Business: If business ceased in Hamilton please complete below.

Date business closed operation

Actual gross receipts from January 1, 2015 through business close date \$

Mail Forwarding Address

Business Contact Name Business Contact Phone

Calculate Business License Tax or Fee Due:

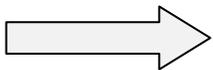
1. Enter 2015 gross receipts in box. If a new business (business started after January 1, 2016), enter an estimate of 2016 receipts.
2. Divide gross receipts by 100 and multiple by applicable rate.
3. Enter calculated tax in box, or \$30 whichever is greater. Home based businesses with gross receipts less than \$4,000.01 do not pay a tax or a fee.
4. Tax payable to TOWN OF HAMILTON. Renewals due: MARCH 1, 2016. New Business: due prior to commencing business.

Type of Business	2015 Gross Receipts or 2016 Estimate for new business (Only if over \$200,000)	Rate Per \$100 of gross receipts or Flat Fee	Calculated Tax or \$30.00 license fee, whichever is greater
Contractors *		\$0.14	
Retail Merchants		\$0.17	
Restaurant		\$0.17	
Financial Service		\$0.17	
Itinerant Vendor	N/A	\$500.00	
Non-Profit or Exempt **	N/A	N/A	
Personal and Business Service		\$0.17	
Professional Service		\$0.17	
Public Utilities		½ of 1%	
Real Estate		\$0.17	
Rental by Owner/Landlords		\$0.17	
Repair Service		\$0.17	
Wholesale ***		\$0.05	

* Contractors with a principal office in the Town of Hamilton should report **2015** gross receipts and submit a breakout of all gross receipts by jurisdiction. All contractors with a principal office outside of Hamilton should **estimate** their **2016** gross receipts produced by construction jobs located within Hamilton town limits (no tax will be assessed for gross receipts less than \$25,000, however a \$30 license fee will still apply).

** Requires IRS tax exempt status proof or proof of state/town code exemption with application each license year.

*** Requires review of business activity and authorization from Director of Finance prior to new license being issued.



Be sure to check with the Hamilton Town Office for proper forms and approval prior to doing business in the town. No business license will be issued until zoning applications are approved by the towns zoning administrator.

APPLICANT CERTIFICATION: *Unsigned applications will not be processed.*

I (we) do hereby certify that the information given and amount(s) reported as gross receipts from this business or profession as reported herein is true and correct, and that I am familiar with the town ordinance for penalties and revocation of my (our) license for making fraudulent statements in the application.

Print Name _____ Title _____

Signature _____ Date _____

Office Use Only

Amt. Pd. \$ _____ Ck # _____ Rcvd Date _____ Rcvd By _____

Cust # _____ Invoice # _____ Tax \$ _____ Penalty \$ _____

TOTAL TAX \$ _____

Zoning Approval _____ Date _____

Occupancy / Use / Home Occupation Permit # _____

Town of Hamilton

Business, Professional, and Occupational License Instructions and Checklist

When to file: *All renewal applications are due on or before March 1st.*

New businesses must have a business license before beginning any business activity in the Town of Hamilton.

Who must file:

Any individual, partnership or corporation engaged in any business or profession or occupation in the Town of Hamilton. Exemption from tax/fee does not preclude requirement to file an application each year.

Renewal Application:

Complete entire application and report actual gross receipts for **2015**.

Exception: Contractors with a principal office outside of Hamilton should estimate **2016** gross receipts.

New Business Application:

Complete entire application. Every new business is required to estimate gross receipts on their initial Business License application. The Town of Hamilton will prepare an adjustment calculation during the second year license renewal process.

Gross Receipts:

“Gross receipts” are defined as whole, entire, total receipts without deductions.

Tax/License Fee Due:

Calculate tax or fee due on page 2 of application. Minimum license tax/fee is \$30.00. Home based businesses with gross receipts less than \$4,000.01 are exempt from a tax/fee. Make checks payable to the Town Of Hamilton.

Penalty:

A 10% late penalty will be assessed on any application that is paid more than thirty (30) days from the start date of the business or after March 1st for renewing businesses.

Zoning Requirements:

Check with the Town of Hamilton for proper forms and approval prior to doing business in the town. No license will be issued without zoning administrator approval.

Businesses located in Loudoun County or any jurisdiction within Loudoun County:

Businesses must complete the Loudoun County Business Tangible Personal Property Registration form. The Town will forward the form to the County.

Restaurants:

Hamilton meals tax rate is currently 4%. You are required to complete a monthly Meals Tax Return Form, due by 20th of each month for prior month sales. There is a 5% discount of the tax collected if return filed and paid on time. Late filings are subject to a 10% penalty. You should request the forms from the Finance Department.

Home Based Business:

You do need a business license including if you are being paid as a consultant and/or the records are stored at the home.

Rental by Owner/Landlords:

A rental worksheet must be completed each year for all commercial building rentals and for owners of 3 or more rental units.

Wholesale Business:

Contact the Town Office for business activity review requirements.

Applicant Certification:

The applicant's signature is required to certify the information and acknowledge the Town's ordinance for penalties and revocation of the license for fraudulent statements. Unsigned applications will not be processed.

CONSTRUCTION TRADE ONLY: All Contractors must complete Workers Comp form (VWC 61A), a subcontractors listing, and provide copy of VA State Contractors License. Contractors must report the total gross sales of the job at time of application*.

Principal Office in Town of Hamilton: Taxes are calculated on **2015** gross receipts for work done in Hamilton and other jurisdictions where a license fee is not charged. You must provide breakdown of all gross receipts by jurisdiction with application.

Principal Office outside of Hamilton, but in Virginia: Taxes are calculated on **estimated 2016** gross receipts for work done in Hamilton, if gross receipts are greater than \$25,000. There is no tax/fee for annual gross receipts less than \$25,000 but are still required to register with the Town.

Out of State Contractors: Taxes are calculated on gross receipts for work done in Hamilton only and length of time worked in Hamilton requires a presence for at least thirty (30) days.

***Multi-Year Projects:** For license purposes, Contractors should provide estimated gross receipts for each year of the project. The Town of Hamilton will prepare an adjustment calculation during the last year of the project.

APPLICATION CHECKLIST

Have you Enclosed ALL the Forms Required?

All Businesses

- Completed & signed 2016 application

Businesses located in Loudoun County

- Loudoun County Business Tangible Personal Property Registration form

Contractors

- VA State Contractors license
- VA Workers Comp form (VWC 61A)
- Contractor and Subcontractor listing (Town of Hamilton form)

Hamilton based contractors also must provide

- Breakdown of all gross receipts by jurisdiction

Property Rental/Landlords

- Rental Property Worksheet

Questions: Should you need assistance in calculating the fees or have questions, please contact Christy Ashby at (540) 338-2811 or christina.ashby@town.hamilton.va.us

Town of Hamilton
P.O. Box 130
53 East Colonial Highway
Hamilton, VA 20159
540-338-2811

CORPORATE SUMMARY

CORPORATE NAME: _____

STATE OF INCORPORATION: _____

DATE OF CHARTER (If VA Corporation): _____

DATE OF CERTIFICATE OF AUTHORITY: _____
(Attach a copy of VA Charter or Certificate of Authority)

PRINCIPAL OFFICER/CEO: _____
(Address & phone – business as well as personal)

REGISTERED AGENT: _____
(Address & phone)

Is this Corporation a Subsidiary or Affiliate of another Corporation?

YES or NO

If YES, complete the following:

Name of Parent Corporation: _____

Principal Officer: _____

Physical Address: _____

Town of Hamilton
P.O. Box 130
53 East Colonial Highway
Hamilton, VA 20159
540-338-2811

LIMITED LIABILITY COMPANY SUMMARY

LLC TAX IDENTIFICATION # (FEIN): _____

MANAGING MEMBER: _____ SS #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

MEMBER: _____ SS #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

MEMBER: _____ SS #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

REGISTERED AGENT: _____ SS #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

Please attach separate listing for additional members.

PLACE ARTICLES OF ORGANIZATION RECORDED: _____ DATE RECORDED: _____

YOU MUST ATTACH PROOF OF SCC REGISTRATION & CERTIFICATION



Home Occupation Permit

Town of Hamilton

53 East Colonial Highway, PO Box 130, Hamilton, VA 20159-0130 ♦ Phone (540) 338 – 2811 ♦ Fax (540) 338 – 9263

In accordance with Article 4, Section 7 of the Hamilton Zoning Ordinance, an occupation conducted in a dwelling unit may be approved for a Home Occupation Permit, provided that:

1. No person other than members of the family residing on the premises shall be engaged in the occupation.
2. The use of the dwelling unit for the home occupation shall be clearly incidental and subordinate to its use for residential purposes by its occupants, and not more than 25 percent (25%) of the floor area of the dwelling unit or 25 percent (25%) of said floor area, if conducted in an accessory building, shall be used in the conduct of the home occupation.
3. There shall be no change in the outside appearance of the building or premises, or other visible evidence of the conduct of such home occupation other than one (1) sign, not exceeding two square feet in area, non-illuminated (sign permit required).
4. No outdoor storage shall be permitted
5. No mechanical or electrical equipment may be used except such type as is customary for domestic, office or hobby purposes.
6. There shall be no sales, other than items hand-crafted on the premises, in connection with such home occupation.
7. No traffic shall be generated by such home occupation in greater volumes than would normally be expected in a residential neighborhood. No equipment or process shall be used in such home occupation which creates noise, vibration, glare, fumes, odor or electrical interference, including but not limited to visual or audible interference or cause fluctuations in line voltage off premises.

Approval by the Zoning Administrator is required. Any occupation deemed questionable in use may be referred to the Planning Commission and Town Council. When the proposed home occupation is within an approved, recorded subdivision, all uses must comply with the Restrictive Covenants, if any, and if required, be approved by the developer and/or homeowners association.

.....

Parcel ID: _____ Zoning: _____

Brief Description of Business Activity: _____

I, the undersigned, do hereby certify that I have read the above and agree to comply with all aspects of the regulations.

Applicant's Name (print) _____	Address _____	Phone _____
--------------------------------	---------------	-------------

OFFICE USE ONLY

Payment (\$25.00) Received: _____ Business License Filed: _____ BPOL #: _____

Approval by Zoning Administrator _____	Conditions of approval (if any) _____	Date of Approval _____
--	---------------------------------------	------------------------



**ROBERT S. WERTZ, JR. ,
COMMISSIONER OF THE REVENUE**

COUNTY OF LOUDOUN

**1 HARRISON ST. SE, 1ST FLR, PO BOX 8000, LEESBURG, VA 20177-9804
(703) 777-0260 WWW.LOUDOUN.GOV/COR FAX (703) 777-0263**

BUSINESS TANGIBLE PERSONAL PROPERTY REGISTRATION

For Businesses located within the incorporated limits of the **Town of Hamilton**

Please complete this form to ensure that return information will be sent to the correct Business owner and mailing address.

This Registration form may be completed online at www.loudoun.gov/business-tax-register in lieu of mailing or faxing this form.

Trade Name: _____ **Business Telephone:** _____

Business Web Site: _____

BUSINESS OWNERSHIP STRUCTURE: (Please Check One)

Sole Proprietorship

Name _____ Social Security Number _____

Home Address _____

Home Telephone _____

Corporation **LLC** **Single Member LLC** **Partnership** **Other** _____

Name _____ Federal Tax ID Number _____

Main Office Address _____

Main Office Telephone _____

General Partner President Managing Member **Please supply list of all Partners, Officers or Members**

Name _____ Social Security Number _____

Home Address _____

MAILING ADDRESS

Address # _____ Street/Road Name _____ Suite/Apt/PO Box # _____ City _____ State _____ Zip Code _____

PHYSICAL BUSINESS LOCATION (No PO Boxes, route numbers or Postal Mail Delivery Locations)

Address # _____ Street/Road Name _____ Suite/Apt _____ City _____ State _____ Zip Code _____

DATE BUSINESS BEGAN IN LOUDOUN AT ABOVE PHYSICAL BUSINESS LOCATION: ____/____/____

DESCRIPTION OF BUSINESS: _____

All businesses are required to annually file a Business Tangible Personal Property tax return by April 15, declaring all property such as furniture, fixtures, equipment, machinery, tools and heavy equipment located in Loudoun County on January 1st of each year. Property located in any of the incorporated towns may be subject to town business tangible property tax in addition to the county levy. An asset list containing date of purchase, property description and original cost must be included with the return. Leased equipment must be declared indicating name and address of the lessor and terms of the lease.

I have read the above and understand my responsibilities under Title 58.1-3518 of the Code of Virginia.

Signature

Date

Print Name

Contact Phone Number

Contact Email Address

Virginia Code §58.1-3519 authorizes the Commissioner of the Revenue to assess property based on the best information available in any case where a taxpayer neglects or refuses to file a complete return. All filings are subject to audit by the Commissioner of the Revenue at any time