TOWN OF CLINTWOOD
BUSINESS LICENSE APPLICATION
FOR YEAR 2026

Business Name: _____

Street Address of Business: _____

Mailing Address: _____

Telephone Number: _____

Applicant's Name: _____

Applicant's Address: _____

Telephone Number: _____

TYPE OF BUSINESS LICENSE APPLYING FOR:

___ Contracting or Construction $30 or .15 cents per $100 gross receipts whichever is greater

___ Retail sales $30 or .15 cents per $100 whichever is greater

___ Financial, Real Estate or Professional Services $30 or .20 cents per $100 whichever is greater

___ Repair, Personal or Business Service $30 or .15 cents per $100 whichever is greater

___ Other (Specify) _____

Estimate of _____gross receipts or preceding year's gross receipts _____.
Enclose a copy of the most recent schedule C or another comparable federal document.

AMOUNT OF LICENSE TAX FOR JAN 1, 2026, THROUGH DEC 31, 2026 is $_____.

ANY SPECIAL CONDITIONS OR REQUIREMENT, IF ANY, UNDER WHICH LICENSED ACTIVITY SHALL BE CONDUCTED: _____

_____

I certify that the statements and figures set forth on this application are true to the best of my knowledge.

_____
Signature of Applicant

To avoid a late penalty charge of 10%, renew your license by March 31, 2026. Return application and fee to: TOWN OF CLINTWOOD, PO BOX 456, CLINTWOOD, VA 24228 (QUESTIONS: CALL 276-926-8383)