



FOOD & BEVERAGE REGISTRATION FORM CULPEPER COUNTY, VIRGINIA

Terry L. Yowell, Commissioner of the Revenue
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Separate Registration Form Needed For Each Location

Name of Business:			
Trade Name:			
Mailing Address:			
Business Location:			
Owners:			
Date the Business Began Operation:		Account #:	
Email:		Telephone #:	
Classification of Operation:			
<small>(Classification examples include but are not limited to Restaurant, Cafeteria, Coffee Shop, Club, Convenience or Grocery Store, Deli, Diner, Dining Room, Eatery, Lunch Counter, Snack Bar, or other establishments preparing food)</small>			
Type of Ownership:	<input type="checkbox"/> Individual (Sole Proprietor) <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation		
Federal Tax ID #:		Social Security #:	
State Sales Tax #:			
Individual Responsible for Day-to-Day Management of Business:			
Individual that will be Filing Monthly:			
Business Owner Responsible for Collection and Payment of Taxes:			

CERTIFICATION: The owner must sign and date this form. If the business is an entity such as a trust, partnership, limited liability company, or corporation, it must be signed by a member, partner, executive officer, or other person specifically authorized in writing by the trust, partnership, limited liability company, or corporation to sign. ***It is a misdemeanor for any person to willfully subscribe a return which is not believed to be true and correct as to every material matter. (Code VA Sec. 58.1-11)***

I, the undersigned, do swear or affirm under penalty of perjury (1) that the figures and statements herein are true, complete, and correct to the best of my knowledge and belief, (2) that I am the owner or a member, partner, executive officer, or other person specifically authorized in writing to sign.

Signature	Printed Name	Title (Owner, President, etc.)	Date