



**Business License Instructions  
Town of Ashland, Virginia**

All businesses located within the Town of Ashland are required to have a town business license. Each year the license is calculated upon gross receipts (or gross purchases for a wholesale merchant). Any business with gross receipts of less than one thousand dollars (\$1,000.00) shall be required to file an application but will be exempt from the license fee. **New applications pay the simple fee of \$30.00 for the license.**

Applications for new businesses will be reviewed by the Planning Department to ensure that the business location is properly zoned prior to license being issued. The Planning Department may be contacted at **804-798-1073** between the hours of **7:30 a.m. & 6:00 p.m. Monday through Thursday.**

Contact the State Corporation Commission (804-371-9733 or [sccfile@scc.virginia.gov](mailto:sccfile@scc.virginia.gov)) if you will be operating a business under an assumed or fictitious name. Trade names that include the sole proprietor's last name do not have to be recorded. Trade names using only an individual's initials or any other fictitious names, which differ from the actual sole proprietor, partnership, LLC, or corporate name must be recorded with the SCC. Code of Virginia 59.1-74 requires proof of recordation before a license may be issued.

**\*All the forms for the 2022 Business License are available on the Town of Ashland website on the Finance Department page as fillable forms for your convenience. [www.ashlandva.gov](http://www.ashlandva.gov)**

If you have any questions, please contact the Town of Ashland's Finance Department by email at [finance@ashlandva.gov](mailto:finance@ashlandva.gov) or by telephone at **804-798-8650**.



**2022 Business License Form**

**Type of Application:** **NEW**

Business/Corporation Name: \_\_\_\_\_

Trading As: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Business Physical Address (if different): \_\_\_\_\_

Primary Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Business Type: \_\_\_\_\_ Start Date: \_\_\_\_\_ Home Based  Yes  No

Business Category:  Food Service  Retail  Professional/Service  Industrial

Other \_\_\_\_\_

Telephone: Primary \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

FEIN/SSN: \_\_\_\_\_ NAICS code \_\_\_\_\_

Business Structure:  Sole Proprietor  Partnership  Corporation  LLC  Other \_\_\_\_\_

New Business License Fee	\$30.00
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**MAKE CHECK PAYABLE TO 'TOWN OF ASHLAND'**

CERTIFICATION OF LICENSEE

I CERTIFY THAT THE FOREGOING STATEMENTS AND FIGURES ARE TRUE, FULL, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

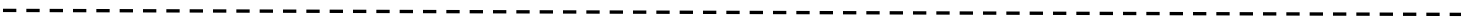
Title: \_\_\_\_\_ Date: \_\_\_\_\_



**Zoning Review for New Business**

Business/Corporation Name: \_\_\_\_\_

Trading As: \_\_\_\_\_



**OFFICE ONLY**

**ZONING REVIEW**

GPIN# \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Proposed Use:

Additional Comments:

**APPROVED      DENIED**

Signature \_\_\_\_\_

Date: \_\_\_\_\_