



MONTGOMERY COUNTY, VIRGINIA

Helen P. Royal, Master Commissioner of the Revenue
755 Roanoke St, Suite 1A, Christiansburg, VA 24073

Business Personal Property Division

Heather Huff

huffhn@montgomerycountyva.gov

540-382-5710

BUSINESS REGISTRATION FORM

Office Use Only	Type of Tax: (check all that apply)
	<input type="checkbox"/> Business Tangible Property
	<input type="checkbox"/> Meals Tax
	<input type="checkbox"/> Transient Occupancy Tax (hotel, motel, airbnb, room rental, etc.)

Owner Information:

Sole Proprietor Partnership Corporation LLC Other

Owner's Name: (if a corp, S Corp, LLC, etc., then please enter the name as filed with the State Corporation Commission.)

Social Security # (sole proprietor / partnerships)

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Federal ID (EIN)

Trade Name:

Physical Address:

Mailing Address:

Is the mailing address the same for all tax types? Yes No (if no, please list on a separate sheet of paper for each tax type.)

Owner's Phone:

Business Phone:

Fax:

Email:

Website:

Description of Business: (list detailed information about the business operations or attach a separate sheet if necessary.)

Start Date and Tax Information:

Start Date:

Sales Tax Registraton #: * (ex: 10-99999999F-001)

***Virginia Sales Tax Registration #** - When reporting sales tax each month to the Department of Taxation, please use Montgomery County's locality **CODE 51121**. This information is used to allocate local sales revenue to Montgomery County in which your business is physically located.

Signature:

I declare that the foregoing statements are true, complete and correct to the best of my knowledge.

Signature of Applicant or Authorized Agent

Date

Reviewed By: _____

Date: _____