



CITY OF MOOREFIELD

206 WINCHESTER AVENUE, MOOREFIELD, WV 26836
PHONE: 304-530-6142 FAX 304-530-6933 townofmfld@hardynet.com

APPLICATION FOR MUNICIPAL LICENSE

IMPORTANT: All questions must be answered. Unanswered questions will result in your application being returned and cause unnecessary delays in obtaining your license. This information is necessary in order that your business activities can be properly classified and the proper license fee determined.

NOTICE: Your license will expire June 30th. Failure to secure new license on or before July 1 will cause \$50.00 penalty for each month or fraction thereof

OFFICIAL USE ONLY

Legal business or corporate name: _____

DBA division, subsidiary or trade name: _____

Mailing Address: _____

Physical Address (if in Moorefield, WV): _____

Description of your business activity: _____

Date business began or will begin in Moorefield: _____ NAICS Code: _____

Office contact name: _____

Contact phone: _____ Contact email: _____

Business website: _____

Will your business sell alcoholic beverages? No _____ Yes _____

Are you an itinerant vendor or door to door peddler? No _____ Yes _____

Type of business ownership: _____ (sole owner, partner, LLC etc.)

FEIN (tax identification number): _____

Business ownership: (owner, partners, members, officers-attach separate sheet if necessary)

Name	Address	Telephone
_____	_____	_____
_____	_____	_____

Were you licensed to conduct business in Moorefield last year? No _____ Yes _____

(over)

The following documents **must be attached** before your license application can be processed:

- _____ WV Business Registration Certificate (from the WV State Tax Department)
- _____ WV Contractor License (if applicable)
- _____ WV Alcoholic Beverage Control Administration License(s) (if applicable)
- _____ IRS 501(c) exemption letter if non-profit and non-taxable (if applicable)
- _____ Hardy County Health Permit (if applicable)

Mark the type of license(s) to be purchased:

- _____ **General Business License** (all business except those listed below) . . . \$ 20.00
- _____ **Itinerant Vendor** \$ 30.00
- _____ **Private Club**
 - _____ Less than 1,000 members \$ 600.00
 - _____ Restaurant \$ 400.00
 - _____ Fraternal, Veterans or Nonprofit Social Club \$ 375.00

Alcoholic Beverage Sales:

Non-intoxicating Beer

- _____ **Retail Sales** (consumption both on and off premises) . . \$ 150.00
- _____ **Class B Beer** (Grocery store. Chilled & non-chilled) \$ 75.00
- _____ **Distributor** \$ 1,000.00
- _____ **Brewer** \$ 500.00

Wine

- _____ **Retail Sales** (Consumption both on and off premises) . . \$ 150.00
- _____ **Wine Distributer** (Wholesale) \$ 500.00
- _____ **Wine Tasting** \$ 50.00

Liquor

- _____ **Retail Sales Class A** \$ 500.00
- _____ **Retail Sales Class B** \$ 1,500.00

Total amount remitted with license application: _____

I certify this application to be true and correct to the best of my knowledge. I understand I am applying for a license to operate a business within the Town of Moorefield. I understand this is an application only and that filing this application does not mean that I have been issued a business license. I understand that this application is subject to review by the Zoning Official, Building Official and Fire Inspector and that these officials may contact me for further information. The business license I am applying for will only be issued by the City Clerk upon completion of the review by such officials and any required permits from outside agencies. Should this application be rejected, my application fee will be refunded and sent to the address set forth in this application.

Signature / Title : _____ Date: _____

Telephone: _____ Email: _____