Warren County, Virginia

Sherry T. Sours, Commissioner of the Revenue

220 N. Commerce Ave., S# 900, Front Royal, VA 22630 * PO Box 1775, Front Royal, VA 22630

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Account#: _____

Expiration Date: _____

APPLICATION FOR VENDOR LICENSE FOR EVENT/SHOW/FESTIVAL

- Please read the relevant Business License and Taxation provisions of Chapter 117 of the Warren County Code.
- Vendor license must be obtained by all vendors unless selling farm or domestic products pursuant to Warren County Code § 117-30.
- **Vendor license fee is $30 per event/show/festival pursuant to Warren County Code § 117-30 D (1)C** unless you have obtained/paid an annual license pursuant to Warren County Code §117-30 (D) (1)(a).
- Payment can be made by check payable to the "**Treasurer of Warren County**" and included with this application or can be done online at www.warrencountyva.net once the Vendor has received notification from Commissioner that the application has been processed and is available for online payment.
- **Vendors who sell food and drink may be subject to additional Meals Tax requirements** per the Warren County Code § 160-94 through § 160-107 and Virginia State Code § 58.1-3833, including the collection & remittance of a separate Meals Tax.
- The issuance of this License does not relieve the licensee of the obligation to comply with the requirements or regulations of the Department of Health, Fire & Rescue Department, Alcoholic Beverage Control Board, and/or all other applicable State or local agencies or County Departments and to maintain in full force and affect all other applicable licenses and permits.

EVENT INFORMATION			
Event Title/Name:		**Event Date(s):**	
Event Location:			
Sponsor Name:			
Sponsor Address:			
Sponsor Contact:		**Contact Phone:**	

VENDOR (APPLICANT) INFORMATION				
Vendor Name:				
Trading As/Fictitious Name (if applicable):				
Business Entity & Names/Titles: • Officers (Pres., V.P., Sec., Treas.) • Directors • Partners • Members	***Check one:*** □ **Sole Proprietor/Individual** □ **Corporation** □ **Limited Liability Company** □ **Partnership** □ **Other (specify):** _____			
	Name	Title	Name	Title
	Name	Title	Name	Title
	Name	Title	Name	Title
Mailing Address:				
Physical Address:				
Business Phone:		**Fax:**		
Contact Person:		**Contact Phone:**		
Email Address:				
Federal EIN / SSN:				
VA Sales Tax No.:		**OR VA Sales Tax *Exemption* No.:**		
Description of Items for Sale:		**Do you intend to sell food/beverages?**	□ **Yes** □ **No**	

CERTIFICATION

This application with signature confirms that Applicant has complied with all the requirements of the Warren County Code. If the Applicant is a business 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 Virginia Section 58.1-11)**

I, the undersigned, do swear or affirm under penalty of perjury that (1) the information herein is true, complete, and correct to the best of my knowledge and belief, (2) I understand the limits of this License, and (3) I am an individual, the business owner, or a member, partner, executive officer, or other person specifically authorized by the business in writing to sign on its behalf.

_____	_____	_____	_____
Signature	*Print Name*	*Title or Capacity for Signing*	*Date*