



T. Scott Harris, MCR
Commissioner

COUNTY OF HANOVER, VIRGINIA
Office of the Commissioner of the Revenue
P.O. Box 129
Hanover, VA 23069-0129
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**CONTRACTOR'S BUSINESS
LICENSE APPLICATION
TAX YEAR 2020**
Out of County Contractors

Account Number				
Legal Business Name			Physical Address	
Trade Name/DBA			Mailing Address	
FEIN	SSN (Sole Proprietors)	Contact Number	Business Number	Fax Number
VA State Registration Number		Email Address		Website

Single Project Contractors		
If you are an out of county/state contractor working on a single project, your tax will be based on the estimate of the project. You'll be asked to true-up when the job is complete.		
Project Start Date	Project End Date	Estimated Project Costs
<input type="checkbox"/> Original Application. If this application is an initial license request for a single project and is an estimate, please check this box.		
<input type="checkbox"/> True-Up. If this application is a true-up for a previously submitted single project, please check this box.		

Pursuant to Virginia State Code §58.1-2700, every contractor shall obtain a license for each business. If the gross receipts of the business exceed \$100,000 in the prior year, there shall be a license tax in the amount of ten cents (\$0.10) per one hundred dollars (\$100.00) of gross receipts. The license tax is assessable, due and payable by March 1 of each license year.

LICENSE TAX CALCULATOR			
GR	Reportable Gross Receipts to Hanover County or Estimated Project Cost for contractors new to Hanover County		
TR	Tax Rate	X	0.001
TAX	If GR is \$100,000 or less, enter \$0.00; otherwise, multiply GR by Tax Rate	\$	
LFP	Late Filing Penalty: Multiply TX by 10% if renewing after 03/01/2020	\$	
DUE	***TOTAL DUE: Sum of TAX + LFP	\$	
*** If a license application is not filed and the tax is not paid within the time provided, the amount due shall be subject to interest at ten percent (10%) per annum commencing on the first day following the day such tax is due as well as a ten percent (10%) late filing penalty. Please contact the Hanover County Treasurer's Office at (804) 365-6050 for the actual interest rate or any other additional payment information.			

Contractor's Certification of Workers' Compensation Liability (VA Form 61-A) MUST be completed and submitted with this application.
You may also submit a confirmation from the Virginia Workers' Compensation Commission.

Declaration: By signing below, I declare that the statements and figures herein given are true, full and correct to the best of my knowledge and belief. I acknowledge the Workman's Compensation requirements as stated above.

Signature	Date	Telephone Number
Signature (person other than taxpayer preparing this form)	Date	Telephone Number