

Food & Beverage Tax Registration Form

(To be completed and returned within 10 days to the Commissioner of the Revenue, Sherry T. Sours, P. O. Box 1775, Front Royal, VA 22630-0038)

Federal Identification Number and/or

Social Security Number: _____

Beginning Business Date: _____

{In Warren County}

Name: _____

Trade Name: _____

Phone Number: _____

Mailing Address:

Tax Map No: _____

Physical Location of Business:

Registration form may be faxed to 540-636-8280