

# NELSON COUNTY VIRGINIA

## OCCUPANCY TAX REGISTRATION FORM

Virginia Sales Tax Registration # \_\_\_\_\_

Name \_\_\_\_\_

Trade Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Local Address \_\_\_\_\_

(When address is different from mailing address)

\_\_\_\_\_

Class \_\_\_\_\_

(Hotel, Motel, Bed & Breakfast, Houses, Condos, Campgrounds)

Telephone Number \_\_\_\_\_

Date Business Began in County \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**IMPORTANT:** Name and telephone number of accountant or person responsible for reporting tax if other than above.