

NELSON COUNTY
COMMISSIONER OF REVENUE
Pamela C Campbell
P O BOX 246,
LOVINGSTON, VA 22949
PHONE 434-263-7070 FAX 434-263-7074
pcampbell@nelsoncounty.org

REGISTRATION FOR MEALS TAX

FEDERAL ID# or SS# _____

TRADE NAME
Of BUSINESS _____

OWNER _____

LOCATION of BUSINESS _____
STREET AND NUMBER

CLASS _____
RESTAURANT, CAFETERIA, DELICATESSEN, SNACK BAR, ETC

MAILING
ADDRESS _____

PHONE NUMBER _____

EMAIL ADDRESS _____

TYPE of OWNERSHIP _____
INDIVIDUAL-PARTNERSHIP-CORPORATION

CORPORATION
NAME of OFFICIALS _____

DATE STARTED
AT THIS LOCATION _____

NAME of BUSINESS SUCCEEDING _____

SIGNATURE _____ DATE _____

TITLE _____