

FEDERAL ID OR SSN

COMMISSIONER OF THE REVENUE

201 JAMES AVENUE, P. O. BOX 3401
COLONIAL HEIGHTS, VA 23834-9001
(804) 520-9280 FAX (804) 520-9250
cor@colonialheightsva.gov

PLEASE CHECK

Individual _____
Corporation _____
Partnership _____

APPLICATION FOR 2026 CITY BUSINESS LICENSE

Please fill in ALL blanks pertaining to your business. If you have a 2025 BL, this form and payment must reach us by **March 1, 2026**. 10% penalty applies after. New businesses must have their license prior to opening.

Date began business in Colonial Heights _____ Type of Business _____

If you were in business for all of 2025, Gross receipts as shown by applicant's records \$ _____

If you began business after January 1, 2025 and prior to January 1, 2026: Gross Receipts for 2025 \$ _____

Estimated Gross Receipts for 2026 \$ _____

If you opened for business on or after January 1, 2026, Estimate Gross receipts for 2026 \$ _____

Itinerant Merchant - \$500 Annual Fee. Limitation of 30 consecutive days. Dates of Operation _____

Wholesale Merchant

If you were in business for all of 2025, Gross purchases as shown by applicant's records \$ _____

If you began business after January 1, 2025 and prior to January 1, 2026; Gross purchases for 2025 \$ _____

If you began business on or after January 1, 2026, Estimated purchases for 2026 \$ _____

BEER/WINE: On premise \$50 _____ Off premise \$50 _____ On&Off premise \$60 _____ Tobacco Sales \$5 _____

MIXED BEVERAGES: Seating Capacity: 50-100 _____ \$200 101-150 _____ \$350 151 + _____ \$500

CONTRACTORS: Please provide a copy of your VA Contractors Board License, Form 61-A or WC Certificate.

Gross Contract in Colonial Heights \$ _____ Job Location _____

Printed Name of Applicant/Owner/Agent _____

Mailing Address for Business _____

Printed Business Name _____

Colonial Heights Business Location _____

Applicant Phone _____ Business Location Phone _____

Signature of Responsible Party _____ email _____

ALL BUSINESSES OPERATING UNDER AN ESTIMATED LICENSE (LESS THAN 2 YEARS), PLEASE CALL THE COMMISSIONER OF THE REVENUE OFFICE FOR THE EXACT AMOUNT DUE PRIOR TO MAILING A CHECK. \$30.00 MINIMUM LICENSE AMOUNT
CHECKS SHOULD BE MADE PAYABLE TO: **CITY OF COLONIAL HEIGHTS**

PER \$100: .20 RETAIL .15 CONTRACTORS .35 PERSONAL SERVICES .57 PROFESSIONAL SERVICES .57 REAL ESTATE .05 WHOLESALE

ISSUANCE OF A CH BUSINESS LICENSE DOES NOT RELIEVE THE APPLICANT FROM OBTAINING ANY OTHER NECESSARY APPROVALS
REQUIRED BY ANY OTHER CITY OF COLONIAL HEIGHTS ZONING OR OTHER ORDINANCE.