



# The City of Morgantown

389 Spruce Street  
Morgantown, West Virginia 26505  
(304) 284-7408 Fax: (304) 284-7418  
www.morgantownwv.gov

\$ _____	B&O TAX# _____
NEW _____	
RENEWAL _____	
LICENSE # _____	
<b>OFFICE USE ONLY</b>	

## MUNICIPAL BUSINESS LICENSE APPLICATION

\_\_\_\_ MUNICIPAL LICENSE FEE \$20.00      \_\_\_\_ NON-PROFIT ORGANIZATION FEE \$ 20.00

**A copy of your WV State Business Registration Certificate and all other current State Licenses must be attached. If the state does not issue a Business Registration Certificate for your business type, please attach confirmation from the State Tax Department and a written explanation. A copy of your IRS Determination Letter must be attached for the fee to be exempt.**

**TYPE OF BUSINESS ENTITY:**

\_\_\_\_ Sole Proprietor      \_\_\_\_ Partnership      \_\_\_\_ Corporation      \_\_\_\_ Limited Liability Co.

**BUSINESS CLASSIFICATIONS:** (Check all that apply)

\_\_\_\_ Contracting: Type of Contractor \_\_\_\_\_ B&O to be paid: \_\_\_\_ Quarterly \_\_\_\_ By the Job  
 WV Contractor's License Number \_\_\_\_\_

\_\_\_\_ Manufacturing      \_\_\_\_ Retail      \_\_\_\_ Restaurant      \_\_\_\_ Wholesale      \_\_\_\_ Rental

\_\_\_\_ Service      \_\_\_\_ Utility      \_\_\_\_ Banking or Other Financial Institution      \_\_\_\_ Amusements

\_\_\_\_ Other (Describe) \_\_\_\_\_

**BEER, WINE, & LIQUOR:** (if applicable)

**A copy of your current West Virginia ABCA License must be attached.**

**NON-INTOXICATING BEER**

\_\_\_\_ Class A/Club, Tavern \$100.00  
 \_\_\_\_ Class B/Unchilled Only-Off Premises \$15.00  
 \_\_\_\_ Class B/Packaged Both-Off Premises \$100.00  
 \_\_\_\_ Distributor-Off Premises \$250.00

**PRIVATE CLUB AND LIQUOR**

\_\_\_\_ Fraternal-Non Profit \$375.00  
 \_\_\_\_ Under 1000 Members \$500.00  
 \_\_\_\_ Over 1000 Members \$1250.00  
 \_\_\_\_ Retail Liquor Sales-Class A \$1,000.00  
 \_\_\_\_ Retail Liquor Sales-Class B \$1,000.00

**WINE**

\_\_\_\_ Wine By The Glass \$250.00      \_\_\_\_ West Virginia Wine \$25.00  
 \_\_\_\_ Retail-Off Premises \$150.00

**TOTAL FEES: \$ \_\_\_\_\_**

LEGAL NAME: \_\_\_\_\_

DOING BUSINESS AS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

**\*\*IF THE PHYSICAL ADDRESS IS LOCATED WITHIN THE CITY BOUNDARIES THE CERTIFICATE OF OCCUPANCY MUST BE INCLUDED WITH THE APPLICATION.\*\***

EMAIL ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_

SECONDARY PHONE: \_\_\_\_\_

FEDERAL IDENTIFICATION NUMBER: \_\_\_\_\_

DATE BUSINESS BEGAN IN CITY: \_\_\_\_\_

DESCRIBE THE BUSINESS ACTIVITY, THE TYPE OF PRODUCT SOLD, OR SERVICE OFFERED.

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LIST NAMES OF ALL OWNERS, PARTNERS, OR CORPORATE OFFICERS:

	NAME	TITLE	ADDRESS	PHONE	SOCIAL SECURITY
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

**PLEASE READ CAREFULLY AND COMPLETELY**

**\*\*ALL CITY OF MORGANTOWN BUSINESS LICENSES ARE ISSUED FOR THE FISCAL YEAR AND EXPIRE ON JUNE 30TH ANNUALLY. LICENSES MUST BE RENEWED ON OR BEFORE JULY 1ST EACH YEAR.\*\***

THE BUSINESS & OCCUPATION (B&O) TAX IS LEVIED ON ALL GROSS INCOME GENERATED FROM BUSINESS ACTIVITY CONDUCTED WITHIN THE CITY. PLEASE NOTE THAT THE B&O TAX IS NOT INCLUDED IN THE FEE PAID WITH THIS MUNICIPAL BUSINESS LICENSE APPLICATION. A SEPARATE B&O TAX RETURN MUST BE FILED AND PAID ACCORDINGLY.

ADDITIONALLY, THE CITY IMPOSES A MUNICIPAL SERVICE FEE (MSF) ON ALL EMPLOYEES AND SELF-EMPLOYED INDIVIDUALS WORKING WITHIN CITY LIMITS. THIS FEE IS ALSO NOT INCLUDED IN THE MUNICIPAL BUSINESS LICENSE APPLICATION FEE. A SEPARATE MUNICIPAL SERVICE FEE (MSF) RETURN MUST BE FILED AND PAID BASED ON APPLICABLE EMPLOYMENT WITHIN THE CITY.

APPROVAL OF THIS APPLICATION REQUIRES THAT ALL OUTSTANDING TAXES, FEES, OR FINES OWED TO THE CITY BE PAID IN FULL.

ALL NEW LICENSE APPLICATIONS FOR BUSINESSES WITH A PHYSICAL LOCATION WITHIN THE CITY LIMITS MUST INCLUDE A CERTIFICATE OF OCCUPANCY ISSUED BY THE CITY'S DEVELOPMENT SERVICES DEPARTMENT.

*I certify this application to be true and accurate to the best of my knowledge.*

SIGN: \_\_\_\_\_

DATE: \_\_\_\_\_

PRINT: \_\_\_\_\_

TITLE: \_\_\_\_\_