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| Z:\Z-All Other\Ranson, WV Logo Kit\Horizontal Logo\JPG\Ranson-Horiz-RGB-Tag.jpg  **Municipal Business License Application**  **312 S. Mildred St., Ranson, WV 25438-1621 • (304)725-1010 • (304)728-8579 •** [www.cityofransonwv.net](http://www.cityofransonwv.net) | |
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| |  |  |  | | --- | --- | --- | | Application is hereby made, by the undersigned, for a Municipal Business License under the provisions of Section 6-2, 6-21, and 6-41 of the Ranson Municipal Code as authorized by Section 8-13-4 of the West Virginia State Code. | | | | **Section I/II: Contact Information/Business Information** | | | |  |  | | | Business Name: |  | | | Owner/Contact Name: |  | | | Business Location – Street: |  | | |  |  | | | Federal Tax ID: |  |  | | Phone #/Fax #: |  | | | Email Address: |  | | | Mailing Address: |  | | | City/State/Zip: |  | | | Local Office Address:  (if different from above)  (if |  | | |  |  | | | | | | | | | |
| **\*A copy of your WV State Business Registration Certificate MUST accompany this application.** | | | |  | | | |
|  | | |  | | | | |
| **CONTRACTORS ONLY: WV STATE CONTRACTOR'S LICENSE NUMBER:** | | | | **WV** |  | | |
| **\*(A copy of your WV State Contractors License MUST accompany this application.)** | | | | | | | |
|  | | |  | | | | |
| **HEALTH PERMIT/LIQUOR LICENSE NUMBER (For Food/Liquor Service Only):** | | | |  |  | | |
| **\*(A valid and current copy of your applicable Food Service/Health/Liquor Permit must be attached)**  **DAYCARE OPERATORS ONLY: WV DEPT HEALTH AND HUMAN RESOURCES PERMIT# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | |  |
| **\*(A copy of your WV Department of Health and Human Resources Permit must be attached)**  **Is this a new business within the city? Yes No If yes, and the physical location of the business is in the city of Ranson, our Planning and Zoning Department (P & Z) must approve.** | | | | | | |  |
|  | | | | | | | **P&Z Dept Initials** |
| **If applying for a landlord’s license, list rental property location(s). If more space is needed, list on a separate sheet:** | | | | | | |  |
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|  | |  | | **\*\*\*FORM MUST BE SIGNED AND DATED\*\*\*** | | | |  | | |  |
| **SECTION IV: DECLARATION**  **I HEREBY DECLARE THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE.** | | | | | | | | | | | |
| **TOTAL FEE DUE (REFER TO SECTION III “Schedule of Fees” on the back of this form) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | |
| PRINT NAME |  | |  | | |  | | | | |  |
|  | | | | | | | | | | | |
| SIGNATURE |  | |  | | | | DATE | |  |  |  |
|  |  | |  | | | | | | |  |  |
| TITLE |  | |  | |  | | | | |  |  |

# 2

**PLEASE CHECK APPLICABLE ACTIVITIES AND INCLUDE PAYMENT WITH YOUR LICENSE FEE.**

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| --- | --- | --- | --- |
| **ACTIVITY** | | **FEE** | **TOTAL FEE** |
|  | 1) Cigarette/Tobacco Vendors/Sales | $15.00 | $ |
|  | 2)Coin Operated Merchandise, Services, Music, Amusement devices, or vending machines |  |  |
|  | a. baggage or parcel checking device | $ .50 a machine | $ |
|  | b. toilet locker, sanitary napkin, or bed vibrating | $ .50 a machine | $ |
|  | c. washing, cleaning, or dry cleaning devices | $3.00 a machine | $ |
|  | d. more than ten total machines | $30.00 | $ |
|  | e. one cent devices  more than twenty devices | $2.00 a device  $50.00 | $ |
|  | f. five cent devices  more than twenty devices | $5.00 a device  $150.00 | $ |
|  | g. ten cent devices  more than twenty devices | $10.00 a device  $250.00 | $ |
|  | h. over ten cent devices  more than twenty devices | $12.00 a device  $300.00 | $ |
|  | 3) Hawkers and Peddlers |  |  |
|  | a. traveling without a vehicle | $10.00 per vehicle | $ |
|  | b. vehicles of not more than ½ ton | $15.00 per vehicle | $ |
|  | c. vehicles from ½ ton to one ton | $50.00 per vehicle | $ |
|  | d. vehicles from one ton to two tons | $100.00 per vehicle | $ |
|  | e. vehicles more than two tons | $150.00 per vehicle | $ |
|  | 4) Health Care Facilities | $20.00 | $ |
|  | 5) Hotels, motels, and boarding houses | $10.00 | $ |
|  | 6) Insurance |  |  |
|  | a. Broker | $10.00 | $ |
|  | b. Agent | $5.00 | $ |
|  | 7) Real Estate |  |  |
|  | a. Broker | $50.00 | $ |
|  | b. Agent | $5.00 | $ |
|  | 8) Palmist | $200.00 | $ |
|  | 9) Corporation-Only those having a physical address in Ranson |  |  |
|  | a. Under $5,000 in assets | $20.00 | $ |
|  | b. Over $5,000 in assets | $25.00 | $ |
|  | 10) General Store | $15.00 | $ |
|  | 11) Restaurant | $10.00 | $ |
|  | 12) Private Club (List ABC License #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | $500.00 | $ |
|  | 13) Beer Sales |  |  |
|  | a. Retail Packaged (Cold) | $25.00 | $ |
|  | b. Retail Packaged (Warm) | $15.00 | $ |
|  | c. Dispenser (Club) | $100.00 | $ |
|  | 14. Wine Sales | $150.00 | $ |
|  | 15. Liquor Sales |  |  |
|  | a. Class A State License (List ABC #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | $1,500.00 | $ |
|  | b. Class B State License (List ABC #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | $500.00 | $ |
|  | 16. Truck, Auto, Taxi Parking Privilege | $50.00 | $ |
|  | 17. Pool Tables (Must pay for each table at location) | $25.00 1st Table  $15.00 Add’l Tables | $ |
|  | 18. Pawn Broker | $100.00 | $ |
|  | 19. Doctor, Lawyer, Dentist | $15.00 | $ |
|  | 20. Drug Store/Pharmacist | $15.00 | $ |
|  | 21. Building/Trade Contractor | $15.00 | $ |
|  | 22. Business or Service – General (List type) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  22a.Business or Service – Home Occupancy \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $15.00  $15.00 | $  $ |
|  | 23. Tree Service | $25.00 | $ |
|  | 24. Landlord | $15.00 | $ |
|  | 25. Not-for-Profit organization (with proof of status) | $00.00 | $ |
| **TOTAL FEES REMITTED** | | | $ |