



**Vendors Registration**

|   |        |                |                                 |
|---|--------|----------------|---------------------------------|
| Form # COPP-Vendor2005.9.01   | Date   |                | Business Owner's City License # |
| <b>Business and Occupation Tax Information</b><br>Owners are required to see that Business and Occupation Tax is paid in full by each Vendor doing business on their premises.<br>The B&O Tax Rate per Vendor is \$2.00 per \$100.00 of gross income. |        |                |                                 |
| <b>City License</b><br>All Vendors must obtain a City License before conducting any business within the corporation limits of the City of Point Pleasant. License application may be purchased at the City Building – Cost \$10.50 per fiscal year.   |        |                |                                 |
| <b>This form is to be completed by the Business Owner.</b><br>List all Vendors associated with this business. – Use additional forms if necessary.  |        |                |                                 |
| Vendor NAME   |        |                | BUSINESS NAME                   |
| Address 1   |        |                |                                 |
| Address 2   |        |                |                                 |
| City, State, Zip  |        |                |                                 |
| Phone   | Office | FAX            | Home                            |
| State License #   |        | City License # | Estimated Gross Income          |
| Vendor NAME   |        |                | BUSINESS NAME                   |
| Address 1   |        |                |                                 |
| Address 2   |        |                |                                 |
| City, State, Zip  |        |                |                                 |
| Phone   | Office | FAX            | Home                            |
| State License #   |        | City License # | Estimated Gross Income          |
| Vendor NAME   |        |                | BUSINESS NAME                   |
| Address 1   |        |                |                                 |
| Address 2   |        |                |                                 |
| City, State, Zip  |        |                |                                 |
| Phone   | Office | FAX            | Home                            |
| State License #   |        | City License # | Estimated Gross Income          |
| Additional Pages Required?  |        | NO             | YES                             |
|   |        |                | PAGE                            |
|   |        |                | OF                              |
| I certify that the above information is true and correct<br>I hereby acknowledge responsibility for the City of Point Pleasant Business and Occupation Tax.   |        |                |                                 |
| Business Owner  | PRINT  | Signature      | Date                            |