

LEE COUNTY LICENSE

INDEX # _____

For The Calendar Month Of _____ To Be Based On
Gross Receipts For The Preceding Month, And To Be Completed And Reported No
Later Than The 20th Day Of The Month.

RETURN TO:
Commissioner of the Revenue
P. O. Box 96
Jonesville, VA 24263

Applicant: _____
Print or Type

Definite Place Of Operation:

Number, Street or Rural Route

Number, Street Or Rural Route

City State Zip Code

City State Zip Code

Trading As:
Individual Partnership Corp.

Date Applicant Began Business At Above Place: _____

Deep Strip Auger
Well Other (Check Which)

This license is to be obtained monthly from the Commissioner of the Revenue, Lee County, Jonesville, Virginia. Checks should be made payable to the Treasurer of Lee County. License not obtained on time will incur a penalty of 10% plus interest.

KIND OF LICENSE	TONNAGE	GROSS RECEIPTS	BASIS	TAX
COAL SEVERANCE			2%	
OIL SEVERANCE			1/2%	
CUBIC FEET OF GAS			3%	
TOTAL				

NAME AND ADDRESS

Shipper Sold To _____

Dock Shipped Through _____

Tax Paid By _____

OATH: I, The Undersigned Applicant, Do Swear (Or Affirm) That The Foregoing Figures And Statements Are True, Full And Correct To The Best Of My Knowledge And Belief.

Sworn (Or Affirmed) On This _____ Day Of _____

Signature of Applicant For License

This name must be the same as that given at the top of this application. If the application is signed by an authorized agent of the applicant, insert signature below:

BY: _____

LICENSE

I, the Commissioner of the Revenue, do find the foregoing application, in due form; therefore, licenses are this day severally granted the applicant named in the application to prosecute the businesses, employments, or professions covered by the application as indicated by the definite place or house in my County, described in the application.

FOR THE PERIOD BEGINNING _____ AND EXPIRING _____

This License shall not be valid or have any legal effect unless and until the taxes prescribed by law (and penalties and fees) as shown on the foregoing application and hereon, be paid to the Treasurer of my County.

Date Signed _____
Commissioner of the Revenue

TAXES PRESCRIBED BY LAW	# _____
10% PENALTY FOR LATE FILING	\$ _____
INTEREST	\$ _____
BALANCE DUE ON THIS LICENSE	\$ _____

Treasurer

RECEIVED:

Date _____ Amount \$ _____

By: _____ Treasurer's Office