

**City of Mount Hope**  
**PO BOX 151, MOUNT HOPE, WEST VIRGINIA 25880**  
**PHONE: 304-877-2211 FAX: 304-877-2880**  
**APPLICATION FOR MUNICIPAL LICENSE**

**IMPORTANT:** All questions must be answered. Unanswered questions will result in your application being returned and cause unnecessary delays in obtaining your license. This information is necessary in order that your business activities can be properly classified and the proper license fee determined. A separate application is required for each business location.

Business Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Physical Address \_\_\_\_\_  
Business Phone w/ Area Code \_\_\_\_\_  
Business Owner Name & Address \_\_\_\_\_

Do you own the structure where business is located:      YES    NO?  
If no give name and address of owner \_\_\_\_\_

Have you previously been licensed with the City with a different business name?  
If yes give business name under which you were licensed      YES    NO

Date you began this business in the City \_\_\_\_\_

Type of Business (check one)  
Individual  Corporation  Partnership  Other   
**FEIN No. or Social Security #** \_\_\_\_\_  
**\* WV Contractors Number:** \_\_\_\_\_  
**\* Certificate of Liability Insurance (Acord 25 Certificate):**  
\_\_\_\_\_   
**\* Certificate of Workers Compensaton Policy #:**  
\_\_\_\_\_   
**\* (Must have copies of these attached to application)**

Give a brief description of the nature of your business:  
\_\_\_\_\_

Do you sell cigarettes or other tobacco products?      YES    NO  
Do you sell soft drinks?      YES    NO  
Do you sell non-intoxicating beer?      YES    NO  
If yes, do you sell non-intoxicating beer for consumption on the premises?      YES    NO

West Virginia Beer License Number \_\_\_\_\_

Type of club license:  
Fraternal or Veteran \_\_\_\_\_ Other membership \_\_\_\_\_

Does your business have any coin operated devices?      YES    NO  
Who owns said devices?

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Attach additional sheet if necessary)

Signature of Applicant \_\_\_\_\_

Title of Applicant \_\_\_\_\_

Date of Application \_\_\_\_\_ License Fee Paid \_\_\_\_\_

*Business License Classification (Check all that apply)*  
All applicants must attach a copy of  
West Virginia Business Registration Certificate

WV State Business Registration Acct.  
# \_\_\_\_\_ **FEES**

- |     |                                 |         |
|-----|---------------------------------|---------|
| 1.  | <b>General Business License</b> | \$35.00 |
| 2.  | <b>Hawker/Peddler</b>           | \$25.00 |
| 3.  | <b>Junk Dealer</b>              | \$25.00 |
| 4.  | <b>Garbage Hauling</b>          | \$45.00 |
| 5.  | <b>Contractor</b>               | \$50.00 |
| 6.  | <b>Attorney</b>                 | \$50.00 |
| 7.  | <b>Engineers</b>                | \$50.00 |
| 8.  | <b>Dental Corporation</b>       | \$50.00 |
| 9.  | <b>Funeral Establishment</b>    | \$75.00 |
| 10. | <b>Pawnbroker</b>               | \$75.00 |

*Retail Liquor includes General Business License*

- |     |  |          |
|-----|--|----------|
| 11. | <b>Class A Store-Liquor License<br/>(on premises consumption)</b>  | \$135.00 |
| 12. | <b>Class B Store-Liquor License<br/>(off premises consumption)</b> | \$135.00 |
| 13. | <b>Beer-Brewery</b>  | \$335.00 |
| 14. | <b>Beer-Distributor</b>  | \$235.00 |
| 15. | <b>Beer-Carry-out</b>  | \$85.00  |

*Business Class (Check all that apply)*

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Amusement         | <input type="checkbox"/> Small Loans |
| <input type="checkbox"/> Banking           | <input type="checkbox"/> Retail      |
| <input type="checkbox"/> Contracting       | <input type="checkbox"/> Utilities   |
| <input type="checkbox"/> Property for Hire | <input type="checkbox"/> Wholesale   |
| <input type="checkbox"/> Manufacturing     | <input type="checkbox"/> Lawn Care   |
| <input type="checkbox"/> Service           |                                      |

**OFFICE USE ONLY**

Date Received \_\_\_\_\_ By \_\_\_\_\_  
Check # \_\_\_\_\_ Cash \_\_\_\_\_  
**Amount Paid \$** \_\_\_\_\_

**ALL CITY LICENSES EXPIRE JUNE 30TH**