



**Stacey C. Fletcher
Commissioner of the Revenue
County of Louisa**

P.O. Box 8
Louisa, VA 23093
(540) 967-3432

**Food & Beverage (Meals) Tax
Registration Form**

(Separate application required for each location)

Name of Business _____

Owner of Business _____

Federal ID Number _____

Business Location _____

Street Address

City

State

Zip Code

Mailing Address (if different from Business Location) _____

Mailing Address

City

State

Zip Code

Email Address: _____

Type of Ownership (Please check one)

Individual

Partnership

Corporation

Name of Official Signing _____

Date started (or date to start) at this location _____

Signature _____ Title _____

Date _____ Daytime Phone Number _____

Return to the Commissioner of the Revenue at the above address