City of Alexandria

INTERDEPARTMENTAL FORM FOR APPROVALS, REFERRALS, AND REQUIREMENTS TO OBTAIN A BUSINESS LICENSE

Owner/Applicant Name _____ **Trade Name** _____

Business Address _____ **Nature of Business** _____

Zoning and code approvals, miscellaneous tax registrations and any other relevant permits or licenses must be submitted with the Business License Application. (Code approval is subject to zoning approval.)

1. □ **Permit Center (One Stop Shop)**
Office of Building and Fire Code Administration
301 King Street, 4th Floor, Room 4200
Telephone: 703.746.4200

Zoning Approval **Zone:**_____**Use:** _____

□ **Approved** □ **Approved with restrictions** □ **Disapproved** □ **Add'l Info. Req'd**

Zoning/Restrictions/Conditions: _____

_____

_____

Date _____ **Signature** _____

Code Approval

□ **No Additional Code Enforcement Permit Required** □ **Additional Permits Required – Applicant Notified**

_____

Date _____ **Signature** _____

Registration: Miscellaneous Tax Package (*if applicable*)

□ **Meals Sales Tax (Restaurant, Carry Out, Etc.)**

□ **Transient Lodging Tax (Hotels, Apartment Hotels, Short-Term Rental Housing, Etc.)**

□ **Short-Term Rental Tax (Equipment Rental)**

□ **Admission Tax (Movie Theaters, Concerts, Tours, Performance, Amusement, Etc.)**

Additional Requirements: *(If applicable)*

2. □ **Virginia State Corporation Commission (**Office of the Clerk)
Entity Formation & Registration of Fictitious Trade Name
Virginia State Corporation Commission, P.O Box 1197, Richmond, VA 23218
(804) 371-9733 https://www.scc.virginia.gov

3. □ **Transportation and Environmental Services** (Traffic Division) (hauling, rickshaws, pedicabs, etc.) City Hall, 301 King Street, Room 4100, Telephone: 703.746.4025

4. □ **Health Department** (Health Permit) (restaurants, grocery stores, hotels, childcare facilities, mobile food trucks, schools, etc.) 4480 King St., Telephone: 703.746.4910 https://www.alexandriava.gov/health

5. □ **Police Department** (Police Clearance and Permits) (antique dealers, check cashing, dealers of second-hand articles, junk dealers, jewelry stores, pawnbrokers, precious metals, gems, and solicitors, etc.)

6. □ **Other:** _____

Taxpayer Signature _____ **Date** _____