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

_______________________________________               _______________________________________
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)

☐ Meal Sales Tax (Restaurants and Carry Outs)                         ☐ Transient Lodging Tax (Hotel, Apartment Hotel, etc)           ☐ Short-Term Rental Tax (Vehicles, Equipment, etc)
Information Packet Received: ________               Registration Packet Received: _________           Application Received: ________

Additional Requirements: (If applicable)

2. ☐ Clerk of Circuit Court (Registration of Fictitious Trade Name)
   520 King St., Room 307, Telephone: 703.746.4044
   http://alexandriava.gov/clerkofcourt/default.aspx#businesses

3. ☐ Transportation and Environmental Services (Traffic Division) (hauling, rickshaws, pedicabs, etc)
   City Hall, Room 4100, Telephone: 703.746.4025

4. ☐ Health Department (Health Permit) (beauty salons, massage therapists, restaurants, etc)
   4480 King St., Telephone: 703.746.4910

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

For additional information go to alexandriava.gov/businesstax