



**Westmoreland
County
Registration for
Meals Tax**

William K. Hoover
Westmoreland County
Commissioner of the Revenue
P.O. Box 68
Montross VA 22520
804-493-0113
804-493-8669 FAX

Name of Business _____

Owner of Business _____

Federal ID# or SS# _____

Class _____

(Restaurant, Cafeteria, Delicatessen, Snack Bar, Food Truck, Etc.)

Business Location _____

Locality Registered (Food Trucks Only) _____

Mailing Address _____

Phone Number _____

Email Address _____

Type of Ownership (please check one)

- Individual
- Partnership
- Corporation

Name of Business Succeeding (if applicable) _____

Start Date at Location _____ Leave Date _____

Signature _____ Date _____

Title _____

PLEASE MAIL FORM WITH YOUR FIRST MEALS TAX RETURN

OFFICE USE ONLY:

Date Received ____/____/____ Postmark ____/____/____

Rcvd by _____