

The City of Belington

Office of City Clerk

45 S. Crim Avenue
P.O. Box 926
Belington, WV 26250

APPLICATION FOR RENTAL REGISTRATION FEE

BUSINESS LOCATION ADDRESS

- 1. Legal Business or Corporate (Name): _____
- 2. DBA, Division or Subsidiary (Name): _____
- 3. Owner's Name (If Sole Owner): _____
- 4. Address (Street or P.O. Box): _____
- 5. City, State and Zip Code: _____

MAILING ADDRESS

- 1. Name: _____
- 2. Address (Street or P.O. Box): _____
- 3. City, State and Zip Code: _____
- 4. Name and Phone Number of Contact Person: _____

1. Corporation, Partnership, Individual, or Other – Enter F.E.I.N. in blocks
(This is your Federal (IRS) Employer Identification Number)
2. West Virginia Identification Number
3. If You Are the Sole Owner You Must Also Enter Your Social Security Number
4. List by
street address all rental property within city.

Over

Page 2

5. Full Name of Individual Owner, Partners or Officers
(Attach Schedule if Additional Space is Required)

| Name | Address |
|-------------|----------------|
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6. Signature: _____ Title: _____ Date: _____

Note: The Registration Fee shall be \$15.00 per year for a maximum term of one year beginning on July 1st and ending June 30th of the succeeding year.

OFFICE USE ONLY

Mail _____
Check _____
Money Order _____

Office _____
Cash _____
Check _____
Credit Card _____
Money Order _____

Amount Received _____

Date Sent _____

B & O Tax _____

License Type _____

Attach Check or Money Order Made Payable to **The City of Belington** and Mail To:

The City of Belington
Office of City Clerk
P.O. Box 926
Belington, WV 26250

Phone (304)823-1611