

TAX & LICENSE DIVISION
PO BOX 1310
515 W MAIN ST
BRIDGEPORT WV 26330
(304) 842-8253
(304) 842-6138 FAX



NAME:	
ADDRESS:	
PHONE NUMBER	
EMAIL ADDRESS	
SOCIAL SECURITY #	

I, _____, do hereby certify under penalty of perjury that pursuant to *West Virginia Code §11-12-3(c)* I am exempt from the WV State Tax Department business registration requirement and do further certify **all of** the following statements to be true.

1. That I am not required by law to collect any tax or withhold a tax (have no employees); **and**
2. That I do not claim exemption from payment of the West Virginia Consumers Sales and Service Tax or Use Tax (referees, umpires, most stage plays, musicians, and dancers are exempt from collecting/paying WV sales tax please reference TSD-400 or contact WV State Tax Department at 304/558-3333 for verification); **and**
3. That I had a gross income from business activity of \$4,000.00 dollars or less from operations in **ALL** states during the income tax year most recently completed.

Based upon the foregoing attestations, I claim an exemption from the Business Registration Tax imposed pursuant to *W. Va. Code §11-12-1 et seq.* and further claim an exemption from the municipal Business Registration Tax imposed pursuant to §717.14 of the Codified Ordinances of the City of Bridgeport for the following (**must check a box**):

- Service (examples include party planners, face painters, balloon artists, music/art lessons)
- Amusement (includes theater, opera house, moving picture show, vaudeville, amusement park, dance hall, skating rink, racetrack, radio broadcasting station, or any other place at which amusements are offered to the public).

WITNESS the following signature with the intent to be legally bound:

Signature

Date

***** IF YOU DO NOT SATISFY THE ELEMENTS OF PARAGRAPHS 1, 2 & 3 ABOVE, YOU ARE REQUIRED TO OBTAIN BOTH STATE AND CITY BUSINESS REGISTRATION AND ARE SUBJECT TO THE BUSINESS REGISTRATION TAX*****

PLEASE NOTE: THIS FORM MUST BE COMPLETED AND SIGNED ON AN ANNUAL BASIS. PAYMENTS WILL BE HELD UNTIL THE FORM IS COMPLETED, SIGNED AND RETURNED TO THE CITY OF BRIDGEPORT.