

IMPORTANT NOTICE
from the York County Commissioner of the Revenue
Business License Required for
Active Food Truck Vendors in York County

This is a reminder that Food Truck Vendors are required to file a Business License Application annually with the office of the Commissioner of the Revenue. If you filed a business license in 2021, that license will expire December 31, 2021. You must apply for a new license for 2022 prior to participating in any York County events. You are also required to contact the York County Zoning Department at (757) 890-3523 to ensure compliance.

To assist you with filing requirements, staff is available Monday-Friday, between the hours of 8:15am-5:00pm. You may also visit our office located at 120 Alexander-Hamilton Blvd. or you may apply for a business license online by visiting our website at <https://www.yorkcounty.gov/475/Forms> and selecting the '[Food Truck-Business License Application](#)' as well as the '[Consumer Tax Registration](#)' form. These documents, along with a current copy of your ID or driver's license, may be submitted through our online document portal at <http://www.yorkcounty.gov/upload> or mailed to: Commissioner of the Revenue, PO Box 189, Yorktown, VA, 23690. Once the required documentation is received, the assessment will be processed and an email will be forwarded to you explaining the online payment process. In order to ensure that the sales tax is forwarded to the correct jurisdiction, it is necessary for you to also contact the Virginia Department of Taxation at (804) 367-8031 to confirm that your retail sales and use tax account reflects a designation of **York County-51199**. You may also visit their website at www.tax.virginia.gov.

IMPORTANT NOTE: The November 2021 Prepared Food and Beverage Tax is required to be filed by December 20, 2021. The December 2021 Prepared Food & Beverage Tax is required to be filed by January 20, 2022, even if you had no activity during the month. For your convenience, we offer online filing on our website at www.yorkcounty.gov/revenue. Simply select the '[Prepared Food and Beverage Tax Monthly Online Filing](#)' under the '[E-Commissioner Online Business Forms](#)' section of our 'Forms' page.

*As of 2021 All Food Trucks will be required to have an inspection by the York County Fire Life Safety Department. Please contact the Fire Life Safety Department at (757) 890-3600 for information pertaining to the scheduling & approval process.

Your business is important to us and we are here to provide any assistance you may need to complete your filing requirements. If you should have any questions regarding this process, please feel free to contact us at (757) 890-3383 or you may email our office at revofc@yorkcounty.gov.

Ann H. Thomas
Commissioner of the Revenue



COUNTY OF YORK
APPLICATION FOR BUSINESS LICENSE - Food Truck
(LOCATED OUTSIDE OF YORK COUNTY)

Commissioner of the Revenue * Zoning & Code Enforcement
 (757) 890-3383 (757) 890-3523

Office Use Only

Acct#: _____

Date _____
 Received: _____

Type of Ownership: Individual Partnership Corporation Limited Liability Company

Applicant/Owner: _____
 (BASED ON OWNERSHIP)

Trade Name: _____

Office Use Only
 Informed Business
 to Contact Zoning _____

 Food Truck Inspected: Y / N
 Date _____

Mailing Address: _____
 Street # Street Name Suite/Unit/Apt. # City State Zip Code

Business Address: _____
 Street # Street Name Suite/Unit/Apt. # City State Zip Code

Start Date/First Event in York County: _____ *York County Requires a New Application Filed Every Year for Food Trucks*
 MM-DD-YYYY

Business Originally Established: _____ Base Locality: _____
 MM-DD-YYYY City or County Business Directed and Controlled

Federal I.D. # _____ State I.D. # _____ Social Security # _____

Email Address: _____ Website Address: _____

Local Business Phone: _____ Corp./Main Office Phone: _____

Cell Phone: _____ Fax Number: _____

Detailed Description of ALL Proposed Business Activities* - (Example: Retail-Food Truck; Description of Items Sold):

***If your business activity changes after the initial application or you will cease to be in operations in York County contact the office of the Commissioner of the Revenue prior to initiating the change or closure**

Applicant/Ownership Information (PLEASE PRINT)

List below, attach list or use the back of this application to identify the Owner, Partners or Officers of the above Company.

Name	Title	SS# (Optional)
Home Address	Home Phone	Cell Phone

Name	Title	SS# (Optional)
Home Address	Home Phone	Cell Phone

Office Use Only
 Proof of Identification: _____
 Valid through: _____

Office Use Only
 Proof of Identification: _____
 Valid through: _____

TAX ASSESSMENT – BASED ON ESTIMATED GROSS RECEIPTS

CLASSIFICATION OF LICENSE BASED ON
 DESCRIPTION OF BUSINESS ACTIVITY:

January	February	March	April
May	June	July	August
September	October	November	December
Months Planned to be Active in York _____			

\$ _____ ESTIMATED GROSS RECEIPTS ROUNDED \$ _____ FEE OR \$ _____ TAX + \$ _____ FLAT FEES = \$ _____ TOTAL DUE

FILING PERIOD ESTIMATE _____ THROUGH **December 31 of Current Year**
 MM-DD-YYYY

OATH: I the undersigned applicant do swear (or affirm) that the foregoing figures and statements are true, full and correct to the best of my knowledge and belief, and that I understand the limits of this license. Furthermore, I understand and acknowledge that completion of this application and payment for a county business license shall not be deemed to be approval to actually operate the desired business activity at the desired location without first obtaining permits, inspections and approvals as required by York County Zoning Department if applicable.

Printed Applicant(s) Name: _____

Office Use Only
 Informed to Contact
 Zoning _____

Applicant(s) Signature: _____ Date: _____