

NEW KENT COUNTY, VIRGINIA
OFFICE OF
THE COMMISSIONER OF REVENUE
 12007 COURTHOUSE CIRCLE RM# 202
 P.O. BOX 99
 NEW KENT, VIRGINIA 23124

ADMISSION CHARGED EVENT APPLICATION

Due 10 days before an event

FED. ID. NO.:

TRADE NAME: _____

PHYSICAL ADDRESS OF BUSINESS: _____

MAIL ADDRESS 1: _____

MAIL ADDRESS 2: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT PERSON(S): _____

NAME OF EVENT: _____

PURPOSE OF EVENT: _____

DATE & LOCATION OF EVENT : _____

| | ESTIMATED ATTENDANCE X | ADMISSION CHARGED = | TOTAL ADMISSIONS |
|---------------------------|------------------------|------------------------------|------------------|
| 1 ST ADMISSION | | | |
| 2 ND ADMISSION | | | |
| | | GRAND TOTAL OF ADMISSIONS | |

(GRAND TOTAL x 4% x 2 = BOND FEE DUE)

NOTE: To avoid a 10 % penalty, you must report each event's tax within 5 days after each event. (Failure to do so shall be considered a Class 1 misdemeanor, punishable by a fine not to exceed \$2,500 or 12 months in jail) Please make all certified checks payable to the Treasurer, New Kent County and mail or make cash payment in person with your return to the Commissioner of Revenue at the address above. New Kent County Code 66-6.

BY SIGNING THIS APPLICATION, I HEREBY DECLARE THAT THIS APPLICATION HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, ACCURATE, AND COMPLETE.

Signature: _____ Date: _____

Printed Name: _____ Phone Number: _____

OFFICE USE ONLY: Treasurer's Signature of Receipt: _____ Bond Fee: _____

Payment Bond Company: _____ Date Received: _____ Received By: _____