

## BUSINESS LICENSE APPLICATION

City of Charleston  
915 Quarrier St., Suite 4  
Charleston, WV 25301  
Phone: (304)348-8024  
www.charlestonwv.gov



Approval Code: \_\_\_\_\_  
Staff Associate Initial: \_\_\_\_\_  
License Fees: \_\_\_\_\_  
Penalty: \_\_\_\_\_  
TOTAL PAID: \_\_\_\_\_

CITY OFFICIAL USE ONLY

## RENEWAL 2025-2026

Please Note: This application is for the renewal of an existing license. If you are a new business or new owner of an existing business, you **MUST** complete the BUSINESS REGISTRATION APPLICATION.

### Section I. License Category:

#### General Business:

\_\_\_\_ 0. GENERAL BUSINESS (\$20.00)

#### Beer - **Must** attach current WV ABCC License

- \_\_\_\_ 1. Distributor (\$250.00)  
\_\_\_\_ 2. Dispenser (\$100.00)  
\_\_\_\_ 3. Club (\$100.00)  
\_\_\_\_ 4. Class A Retail (\$100.00)  
\_\_\_\_ 5. Class B Retail (\$15.00)

#### Liquor - **Must** attach current WV ABCC License

- \_\_\_\_ 6. Private Club Less than 1000 members (\$500.00)  
\_\_\_\_ 7. Private Club More than 1000 members (\$1,250.00)  
\_\_\_\_ 8. Fraternal, Veterans or Non -Profit Social Clubs (\$375.00)

### Section II. Business Information:

A. Name of Business: \_\_\_\_\_

DBA: \_\_\_\_\_ Federal Employer ID/Social Security Number\*: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

B. Ownership Type: \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Non-Profit \_\_\_\_\_ Other

\*\*\*Please attach list of all officers, directors, proprietors or any individual owning 25% or more of the business.\*\*\*

C. Name of individual preparing this application: \_\_\_\_\_ Title: \_\_\_\_\_

D. Phone number of preparer: \_\_\_\_\_ Email: \_\_\_\_\_

E. Description of your business: \_\_\_\_\_

F. Does your business purchase gold, silver or other precious metals, jewels or products? Yes / No If yes, see City Code §18-863

G. Does your business sell? Beer: Yes / No Liquor: Yes / No If Yes, you **Must** attach your ABCC License.

H. Does your business sell or serve prepared food? Yes / No If Yes, you **Must** attach your Kanawha County Health Permit.

I. Does your business conduct home solicitations or door-to-door sales? Yes / No If Yes, you **Must** post a \$3,000 surety bond for each sales representative.

J. Do you own rental property that is located in Charleston? Yes / No If yes, How many rental units do you own? \_\_\_\_\_

RTS ACCOUNT # : \_\_\_\_\_

City Official Use Only

K. Local business phone number: \_\_\_\_\_

L. Physical location of your business in Charleston: \_\_\_\_\_ Zip: \_\_\_\_\_

M. Do you own the property in which your business in Charleston is located (if applicable)? Yes / No

If No, Name of property owner: \_\_\_\_\_ Phone No.: \_\_\_\_\_

N. Does your business contain vending machines? Yes / No

If Yes, Name of owner: \_\_\_\_\_ Phone No.: \_\_\_\_\_

**\*Privacy Act Statement:** Disclosure of a Social Security Number (SSN) to the City of Charleston is voluntary. If you do not wish to disclose your SSN, you may provide an alternative identification number. The City of Charleston solicits this information pursuant to West Virginia Code § 8-13-13 and the Charleston City Code. The City of Charleston will not disclose your SSN or any other information you provide to any other entity or party. The City of Charleston requests this information to facilitate the verification of withholding and payment of service fees

**Section III. Authorized Signature of Business:** By signing below, I do hereby certify and declare, under penalty of perjury, that the information furnished in this application is true, complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Business Owner or Authorized Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

### **Business License Renewal Application Instructions:**

1. Select the appropriate license(s) for your business in Section I. All businesses with a storefront or a physical location within the City of Charleston are required to purchase a General Business License. Sales of beer or liquor require an additional license. If your business intends to sell beer or liquor, you **must** attach a copy of your WV ABCC License.

2. Complete Section II in its entirety. If your business intends to sell or serve prepared food, you **must** attach a copy of your Kanawha County Health Permit. If your business desires to purchase gold, silver or other precious metals, jewels or other products, you **must** comply with the requirements of §18-863 of the Charleston Municipal Code to report your purchases to the Charleston Police Department. If your business intends to conduct door-to-door sales or engage in home solicitation, a \$3,000 surety bond **must** be posted for **each** sales representative.

3. Sign and date the application in Section III.

4. Mail the completed application with your total payment to the address below on or before **June 30, 2025**. If you have any questions with respect to your application, please contact the City Collector's Office at (304) 348-8024.

**Return To:**  
**Charleston City Collector's Office**  
**Attn: Business Licensing**  
**915 Quarrier St., Suite 4**  
**Charleston WV 25301**