

<p><b>Business Category</b> (please check one)</p> <p><input type="checkbox"/> Business/personal service      <input type="checkbox"/> Builder/developer</p> <p><input type="checkbox"/> Contractor      <input type="checkbox"/> Hotels and motels</p> <p><input type="checkbox"/> Repair service      <input type="checkbox"/> Retail/restaurant</p> <p><input type="checkbox"/> Leasing/renting (no inventory)    <input type="checkbox"/> Telephone companies</p> <p><input type="checkbox"/> Professional, specialized occupation</p> <p><input type="checkbox"/> Other (please explain nature of your business)</p> <p>_____</p> <p><b>NAICS Code:</b> _____  <a href="http://www.naics.com">www.naics.com</a></p> <p><input type="checkbox"/> <b>Individual</b>      <input type="checkbox"/> <b>Partnership</b>      <input type="checkbox"/> <b>Corporation</b></p> <p><b>Federal Tax ID #:</b> _____</p> <p><b>Social Security #:</b> _____</p> <p><b>Trade Name:</b> _____</p> <p><b>Mailing address:</b> _____</p> <p>_____</p> <p><i>All correspondence shall be mailed to the trade address unless otherwise specified.</i></p> <p><b>E-mail address:</b> _____</p> <p>_____ Telephone #      _____ Fax #</p> <p><b>Date business established in Herndon:</b> _____</p> <p><b>License #:</b> _____</p>	<p><b>Section 1—License Measured by Gross Receipts</b>  <i>(Estimate gross receipts from beginning through end of current year)</i></p> <p>Gross receipts: _____</p> <p>Tax rate: _____</p> <p>Tax: _____</p> <p>Penalty/interest: _____</p> <p>Total: _____</p> <p><b>Section 2—Operators of Coin-Operated Machines</b></p> <p>Type of machines: _____</p> <p># of machines: _____</p> <p>Tax rate: _____</p> <p>Tax: _____</p> <p>Penalty/interest: _____</p> <p>Total: _____</p> <p><b>Section 3—License Based on Flat Tax</b></p> <p>Type of license based on flat rate: _____</p> <p>Tax: _____</p> <p>Penalty/interest: _____</p> <p>Total: _____</p> <p>Alcoholic Beverage ABC Board #: _____</p> <p><b>Applicant signature:</b> _____</p> <p><b>Print name:</b> _____</p> <p><b>Print title:</b> _____</p>
<p><b>RESIDENCY STATUS AFFIDAVIT:</b></p> <p>All applicants who file as <b>“individual”</b> or <b>“sole proprietor”</b> must complete and have notarized the <b>Residency Status Affidavit</b> before a Town of Herndon business license will be issued.</p>	

The Town of Herndon’s Economic Development office would like to **promote your business**. By checking “yes” below, you would give the town permission to list your business on the town’s website or share your business information with other agencies such as the Dulles Regional Chamber of Commerce and other town departments. (Only business name and contact information would be shared. Gross receipts, taxes paid, social security numbers and tax ID information would not be shared, published, or released.)

Yes       No

If you have any business related questions, please contact the town's Economic Development office at 703-435-6800 X2085 or email [information@herndon-va.gov](mailto:information@herndon-va.gov) for more information.

**FOR OFFICE USE ONLY:**

Total tax & penalties: \_\_\_\_\_ Revenue clerk: \_\_\_\_\_ ZAP/ZIP approval: \_\_\_\_\_

(initials/date)      (initials/date)

**PART 1**

*Submittal with original signature(s) is required. Please print or type (unless otherwise indicated).*

**Business Name:**

\_\_\_\_\_

**New Business Address (include suite #):**

\_\_\_\_\_

\_\_\_\_\_

**Description of the proposed use:**

\_\_\_\_\_

\_\_\_\_\_

**Is the proposed use different from the previous use at this address?**  Yes  No

\_\_\_\_\_ # square feet floor area for business use

\_\_\_\_\_ # of employees

\_\_\_\_\_ # of seats (restaurant only)

\_\_\_\_\_ # of loading spaces

\_\_\_\_\_ # of auto parking spaces

\_\_\_\_\_ # of bike parking spaces

**Are any alterations to the site, building exterior, or interior planned, underway, or completed in connection with this use?**  Yes  No

Please describe: \_\_\_\_\_

\_\_\_\_\_

**Business owner or applicant (name & title):**

\_\_\_\_\_

Mailing address:

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Property owner or agent (name & title):**

\_\_\_\_\_

Mailing address:

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**The undersigned hereby applies for (check one):**

a **Zoning Appropriateness Permit** under the provisions of [§78-202.10](#) and [§78-201.3](#), Herndon Town Code.

a **Zoning Inspection Permit** under the provisions of [§78-202.9](#) and [§78-402.7\(k\)](#), Herndon Town Code.

**I hereby affirm and certify that:**

- The information provided on this form is true and correct to the best of my knowledge.
- The requirements associated with this application have been read and are understood.
- The use and occupancy of buildings and/or the use of land noted above is in conformance with all provisions of the Town of Herndon, Virginia Zoning Ordinance regulations to the best of my knowledge.

**Applicant Signature/Date:** \_\_\_\_\_

**Zoning Administrator**

**Signature/Date:** \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Final inspection date, Zoning Inspection Permit: \_\_\_\_\_

**Zoning Inspector**

**Signature/Date:** \_\_\_\_\_

**Zoning Appropriateness Permit expiration:** \_\_\_\_\_  
(If business is not open or license not approved after six months.)

**SITE INSPECTIONS MAY BE REQUIRED**

**ZONING APPROPRIATENESS PERMIT**— OCCUPANCY APPROVAL IS SUBJECT TO FINAL INSPECTION BY THE FAIRFAX COUNTY FIRE MARSHAL. FOR INSPECTION CALL 703-246-4849. SOME USES WILL REQUIRE A ZONING INSPECTION PERMIT.

**HOME-BASED BUSINESS**— IN CERTAIN CASES A SPECIAL EXCEPTION MAY BE REQUIRED FOR HOME-BASED BUSINESSES. SEE ZONING ORDINANCE [§78-402.7\(K\)](#).

<b>FOR OFFICE USE ONLY:</b>		(revised: July 2017)
Application received by:	Date:	
Tax map reference:		
Ordinance/Plan Reference:		
Zoning District:	Determined Use:	
Status of taxes: <input type="checkbox"/> Paid <input type="checkbox"/> Delinquent		
<input type="checkbox"/> New business <input type="checkbox"/> Renamed business <input type="checkbox"/> Relocation <input type="checkbox"/> Existing		
Distribution after approval: <input type="checkbox"/> Applicant <input type="checkbox"/> Finance		
<input type="checkbox"/> Community Development <input type="checkbox"/> Fire Department <input type="checkbox"/> C&ED		