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Joyce E. Prince  
Commissioner  
Lisa D. Council  
Deputy Commissioner

# City of Emporia

Commissioner of the Revenue  
Post Office Box 956  
Emporia, Virginia 23847

## Transient/Lodging Tax Registration

Acct. Number: \_\_\_\_\_  
(OFFICE USE)

1. Name of Business: \_\_\_\_\_

2. Owner: \_\_\_\_\_

3. Location of Business: \_\_\_\_\_  
Number Street

City State ZIP

4. Class: \_\_\_\_\_  
(restaurant, cafeteria, delicatessen, snack bar, drive in, etc.)

5. Mailing Address: \_\_\_\_\_  
(If different from above location address)

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

Type of Ownership: \_\_\_\_\_  
(Individual-Partnership-Corporation)

Name of Officials if Corporation: \_\_\_\_\_

Date started, or date to start at this location: \_\_\_\_\_

Name of business succeeding (if any): \_\_\_\_\_

Signature Date

Print Name and Title