



JO ANNE HARRIS
Commissioner of the Revenue
COUNTY OF GLOUCESTER, VIRGINIA

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 Gloucester, Virginia 23061

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Responsible Party Information Form

Section I. Entity Information

Legal Name	Account #
Mailing Address	Entity Id #
City St Zip	Tax Type: <input type="checkbox"/> Business License <input type="checkbox"/> Food and Beverage Tax <input type="checkbox"/> Transient Occupancy Tax <input type="checkbox"/> Business Tangible Personal Property and Machinery and Tools

Section II. Individual Owner(s), Partner(s), Member(s) or Corporate Officer(s) responsible for the tax return information. Change of ownership and/or responsible tax party requires completion of new form.

Responsible Party Name		SSN
Home Address	Title	Daytime Telephone Ext
	Effective Date	Tax Type
Signature		Date

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Signature		Date

Section III Preparer information: I certify the above information is true and correct to the best of my knowledge and belief:

Preparer's Name	Title	Daytime Telephone Ext
Signature	E-mail address	Date