



Town of Capon Bridge

PO Box 183

Capon Bridge WV 26711

Phone: 304-856-3625 Fax: 304-856-2495

E-mail: townclerk@townofcaponbridgewv.gov

BUSINESS LICENSE APPLICATION

Town of Capon Bridge, Inc.: Ordinance #43. Provide a copy of state or any other federal or state licenses required to do business when applying for a Town Business License, be it known that applying for and being licensed in the Town of Capon Bridge does not sanction a party(s) or condone licensee from neglecting his obligation and responsibility in obtaining any and all necessary licenses relating to his business. As well, having a Town Business License does not mean or give the licensee permission from the Town of Capon Bridge to operate such a business without first applying and obtaining any and all state and/or federal licenses necessary. License year shall mean the fiscal year beginning July 1 and ending June 30th. The license expires by date on permit.

MUST INCLUDE WEST VIRGINIA STATE LICENSE NUMBER

Business Name: _____

Registered Agent/Owner: _____

Mailing Address: _____

Phone: _____

Location you are providing service: _____

What Services or Goods are you providing _____

WV State License # (Required): _____

Number of Vendors Used, any companies you may be purchasing from. _____

All Vendors Must Have a Town Vendor's License

Due upon Receipt – P.O. Box 183, Capon Bridge, WV 26711-0183

- Please mail back the completed application with the fee.
License year shall mean the fiscal year beginning July 1 and ending June 30.
The license expires by date on permit.
Pay online: townofcaponbridge.wv.gov, Choose Business License from the drop-down menu.
Non-refundable, once permit issued.

Office Use Only

Date: _____ Business License Full Year \$50.00
Amount Received: _____ Thirty-days available \$10.00
Number of Permits Granted _____ Total Permit Fee Due \$
Certificate Issued: _____