



City of Bluefield

200 Rogers Street
 PO Box 4100
 Bluefield, West Virginia 24701
 Phone: 304-327-2401
 Fax: 304-325-6494

Quarterly B&O Privilege Tax

THIS RETURN TO BE FORWARDED AND CHECK MADE PAYABLE TO CITY OF BLUEFIELD, WEST VIRGINIA

Account Number: _____
 Business Name: _____
 Address: _____
 City, ST, ZIP: _____
 Phone: _____
 Email: _____

Quarter Ending _____

If Business discontinued, give date: _____

If Business sold, give name and address of new owner:

Please Indicate any Address Change

CODE	BUSINESS CLASSIFICATION	GROSS INCOME	RATE/ \$100	TAX DUE
1	Gross Value of Manufactured Products		.30	
2	Gross Income of Retailers and Others		.50	
3	Gross Income of Wholesalers		.15	
4	Water Companies		4.00	
5	Electric Light/Power Companies (Sales & Demand Charges, Domestic Purposes and Commercial Lighting)		4.00	
6	Electric Light/Power Companies (All Other Sales and Demand Charges)		3.00	
7	Gas Companies		3.00	
8	Contracting Business		2.00	
9	Amusement Business Gross Income		.50	
10	Rents and Royalties		1.00	
11	Service Business or Other Calling, Professional or Non-professional		1.00	
12	Banking and Loan Companies and Institutions		1.00	

GENERAL DIRECTIONS

- All Businesses, Regardless of Income, Must File a Quarterly Tax Return. - \$25.00 penalty for not filing this form.
- This Return Must Reflect Total Income for all Applicable Classifications.
- Tax Must Be Paid on All Gross Income Received by Business During the Quarterly Reporting Period.
- Businesses Physically Located Outside City Limits Must Pay Tax on All Gross Income Received in City.
- Return Due 30 Days After End of Quarter
- Late Return 5% Penalty for First Month, 1% Per Month Thereafter

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct and complete.

AMOUNT OF TAX DUE

PENALTY

**TOTAL TAX AND PENALTY
ENCLOSED**

Date _____

Signature _____

Title _____

THIS RETURN WITH PAYMENT TO COVER TAX DUE MUST BE RECEIVED WITHIN ONE MONTH FROM END OF PERIOD COVERED.