

**CITY OF WHEELING**

**NEW BUSINESS LICENSE / B & O TAX / CSF FILE INFORMATION**

**1. B & O FILING TYPE:**      **Q-QUARTERLY**      **A-ANNUAL**      **T-TEMPORARY**

**2. PAYROLL PERIOD:**      **WEEKLY**      **BI-WEEKLY**      **BI-MONTHLY**      **MONTHLY**

**3. INDIVIDUAL NAME** \_\_\_\_\_

**4. BUSINESS NAME** \_\_\_\_\_

**5. BUSINESS ADDRESS** \_\_\_\_\_

**6. CITY STATE ZIP** \_\_\_\_\_

**7. PHONE #** \_\_\_\_\_

**8. ALT PHONE #** \_\_\_\_\_

**9. EMAIL ADDRESS** \_\_\_\_\_

**10. BUSINESS START DATE** \_\_\_\_\_

**11. FEIN** \_\_\_\_\_

**12. SOCIAL SECURITY #** \_\_\_\_\_

**13. DESCRIPTION OR NATURE OF BUSINESS**

\_\_\_\_\_  
\_\_\_\_\_

**MAILING ADDRESS IF DIFFERENT FROM BUSINESS ADDRESS**

\_\_\_\_\_  
\_\_\_\_\_

**MAILING ADDRESS FOR PAYROLL/HR IF DIFFERENT FROM ABOVE**

\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURE OF OWNER OR AGENT**

\_\_\_\_\_