CITY OF STAUNTON
COMMISSIONER OF THE REVENUE
116 W. Beverley Street
P.O. Box 4
Staunton, VA 24402-0004
Phone: (540) 332-3829
Fax: (540) 851-4022

CIGARETTE TAX WHOLESALER REGISTRATION FORM

Applicant:	
Cigarette Tax #:	FEIN:
Contact Name:	UPS #:
Address:	
City, State Zip:	
Phone #:	Email:

RETAIL CUSTOMERS LOCATED WITHIN THE CITY OF STAUNTON, VIRGINIA
**Attach additional sheets with requested information if needed.

Trade Name:	
Business Location:	
Mailing Address:	
Contact:	Phone:

Trade Name:	
Business Location:	
Mailing Address:	
Contact:	Phone:

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Business Location:	
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Contact:	Phone:

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