

COUNTY OF ROANOKE, VIRGINIA

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Roanoke, VA
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CIGARETTE TAX WHOLESALER REGISTRATION FORM

FEIN: _____

CIGARETTE TAX LICENSE NO. _____

COMPANY NAME: _____

SHIPPING ADDRESS: _____

CONTACT NAME: _____

PHONE: _____

EMAIL: _____

FED EX ACCOUNT NUMBER: _____

UPS ACCOUNT NUMBER: _____

RETAIL CUSTOMERS LOCATED WITHIN THE COUNTY OF ROANOKE, VA

Trade Name: _____

Business Location: _____

Mailing Address: _____

Contact: _____ Phone No. _____

Trade Name: _____

Business Location: _____

Mailing Address: _____

Contact: _____ Phone No. _____

Trade Name: _____

Business Location: _____

Mailing Address: _____

Contact: _____ Phone No. _____

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