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**South Hill**

# Town of South Hill

Incorporated 1901

ADMINISTRATION  
CODE COMPLIANCE  
OFFICIAL  
PUBLIC WORKS  
(434) 447-3191

## CIGARETTE TAX STAMPS ORDER FORM

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Fed Tax ID #: \_\_\_\_\_ D/B/A Store Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The above named applicant hereby applies to the Finance Director for the following number of rolls of Cigarette Tax Stamps:

# of Rolls \_\_\_\_ x 15,000/roll = \_\_\_\_\_ heat applied stamps (.15 each stamp) = \$ \_\_\_\_\_

# of Stamps \_\_\_\_\_ x .15/self-adhesive stamp = \$ \_\_\_\_\_

Total Stamps Purchased \_\_\_\_\_ Total Tax Amount = \$ \_\_\_\_\_

Add Mailing fee \$5.00/roll and or \$1.00/sheet = \$ \_\_\_\_\_

**Total Amount Due** \$ \_\_\_\_\_

\*\*\*Make Check payable to Town of South Hill\*\*\*

OFFICE USE ONLY – Approved by Finance Director	
_____/_____ Finance Director / Date	
Beginning Serial Numbers _____	Ending Serial Numbers _____
Date Payment Received _____	Amount \$ _____
Date Picked Up /Mailed _____	

Signature: \_\_\_\_\_

(Authorized Representative of Applicant)