Do Not Include This Page

NCDOR NORTH CAROLINA DEPARTMENT OF REVENUE

Instructions for Handwritten Forms

Guidelines

Do not use red ink. Use blue or black ink.

Do not use dollar signs, commas, or other punction marks.

$, ? {

Printing

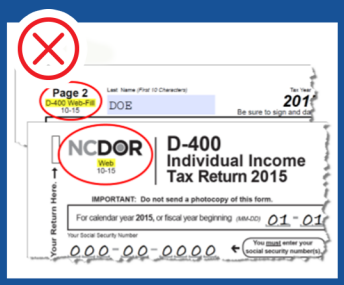
Set page scaling to "none." The Auto-Rotate and Center checkbox should be unchecked.

Do not select "print on both sides of paper."

Before You Send

Do not submit photocopies of returns. Submit originals only.

Do not mix form types



NCDOR
Web
6-19

B-202A
Application for State Privilege License

For Office Use Only

IMPORTANT: If first-time applicant, you **MUST** enter start date of activity that requires this license.

○ **First-Time Applicant**

IMPORTANT: If renewal applicant, you **MUST** enter account number/NCDOR ID for this license.

○ **Renewal Applicant**

For the year beginning July 1, _____ and ending June 30, _____

Part 1. Professional Individuals

First Name **M.I.** **Last Name**

Social Security Number **Daytime Phone** *(Include area code)*

Name of Business Where Professional Individual Is Employed *(optional)*

Address Where License Is To Be Mailed *(This address is printed on the license.)*

City **State** **Zip Code** *(5 Digits)* **County**

Enter Code Number and License Description from Table on Instructions

Part 2. Loan Agencies, Check Cashers, or Pawnbrokers

○ Loan Agency ○ Check Casher ○ Pawnbroker

Legal Name of Business

Federal Employer ID Number **Business Phone** *(Include area code)*

Street Address of Business

City **State** **Zip Code** *(5 Digits)* **County**

Address Where License Is To Be Mailed *(If different from street address)*

City **State** **Zip Code** *(5 Digits)*

2030106009

Part 3. Computation of Privilege License Tax

1. **Total Privilege License Tax Due** *(From Table on Instructions)*	▶
2. **Penalty**	▶
3. **Interest**	▶
4. **Total Payment Due** *(Add Lines 1 through 3)*	$

Signature: _____ **Date:** _____

I certify that, to the best of my knowledge, this application is accurate and complete.

Attach your check or money order to this application. Payment must be in the form of U.S. currency from a domestic bank.
North Carolina Department of Revenue, P.O. Box 25000, Raleigh, NC 27640-0100