

WASHINGTON COUNTY FISCAL COURT
P.O. BOX 126
SPRINGFIELD, KY 40069

APPLICATION FOR OCCUPATIONAL LICENSE

NAME OF APPLICANT: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NUMBER: _____

NATURE OF BUSINESS ACTIVITY: _____

DO YOU HAVE EMPLOYEES? YES _____ NO _____

IF YES, NUMBER OF EMPLOYEES: _____

PLEASE NOTE: IF YOU DO NOT HAVE EMPLOYEES AT THE PRESENT TIME BUT ACQUIRE THEM AT A LATER DATE, PLEASE NOTIFY THIS OFFICE. A COUNTY OCCUPATIONAL LICENSE FEE (WITHHOLDING TAX) BECAME EFFECTIVE ON APRIL 1, 1997.

WHEN DO YOU EXPECT TO BEGIN DOING BUSINESS IN WASHINGTON COUNTY? _____

SIGNATURE OF APPLICANT

TITLE

DATE

PLEASE RETURN THIS APPLICATION TO THE WASHINGTON COUNTY TREASURER AT THE ABOVE ADDRESS, TOGETHER WITH YOUR LICENSE FEE OF \$5.00. IF YOU HAVE ANY QUESTIONS, PLEASE CALL (859) 336-5430.