



City of Burkesville

City of Burkesville
214 upper River Street
Po Box 250
Burkesville, KY 42717

Application for Occupational License

Every business or individual subject to the Occupational License Fee is required to complete this application and return it with \$100.00. The fee is not required of nonprofit organizations. The following information is necessary for our records.

Applicant: _____

Business Name: _____

Address: _____

Mailing address: _____

Phone: _____ Alt. Phone # : _____

Is Business a:

Individual _____ Calendar Year _____

Partnership _____ Fiscal Year _____
Month Day

Corporation _____ Social Security # _____

Other _____ (Describe) _____
or
Federal Tax ID # _____

Nature of Business: _____

Date of operation started in City of Burkesville _____ / _____ / _____
Month Day Year

Do you have or will have employees working in the City of Burkesville?
YES _____
NO _____

If so, the City of Burkesville Payroll Tax to be withheld is 2%

Number of Employees _____

Date employment was first given or will be given _____ / _____ / _____
Month Day Year

Other Information _____

I hereby certify that all information and statements are true and correct;

Signature

Title

Date