

FOR OFFICE USE ONLY  
ACCT # \_\_\_\_\_

City of Henderson, Kentucky

Occupational License Application

222 First Street\*P O Box 671\* Henderson, KY 42419-0671

PH. (270) 831-1290 Ext 2229\* Fax (270) 827-6054\* Web site: [www.cityofhendersonky.org](http://www.cityofhendersonky.org)

Application Fee: \$25 A Cash Bond may be required. Refer to Section 3 of Instructions.

\*Per City of Henderson Ordinance 37-21, copy of lease for over six (6) months attached.\*

Business Name: \_\_\_\_\_ Local Phone No: \_\_\_\_\_

Job Site or Business Address within the City of Henderson City Limits (NO PO BOX): \_\_\_\_\_

Are you the business owner of this property: \_\_\_\_\_ YES \_\_\_\_\_ NO If no, have you attached copy of lease?

FAX Number: \_\_\_\_\_ Start date in the City of Henderson \_\_\_\_\_

Local Manager/Rep: \_\_\_\_\_ Description of Business \_\_\_\_\_

Will you have payroll employees in the City of Henderson? \_\_\_\_\_ Yes (Withholding Tax Rate is 1.49%) \_\_\_\_\_ No

Will you have contract (1099) labor in the City of Henderson: \_\_\_\_\_ Yes \_\_\_\_\_ No

Check Entity Type: \_\_\_\_\_ Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ Limited Liability Partnership

\_\_\_\_\_ Limited Liability Company filing as: Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_ Non-Profit *must attach IRS determination letter*

Check if applicable to this business: \_\_\_\_\_ Alcohol Sales

**Identification of business applicant may be requested.**

I certify that all the information on this application is true and correct.

Print Applicant Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

Print Applicant Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

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Accounting Period for Federal Tax Filing Check One: \_\_\_\_\_ Calendar Year or Fiscal Year End Date: \_\_\_\_\_

Social Security No. of Business Owner: \_\_\_\_\_ Business Federal ID No.: \_\_\_\_\_

Accounting Firm or Individual Name: \_\_\_\_\_ Phone: \_\_\_\_\_

General Mailing Name & Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Fax No: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

Home Office Name & Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Fax No.: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

Address to Payroll Withholding Returns if different from General Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Fax No: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

Address to mail Net Profit License Fee Return if different from General Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Fax No: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

**Owner/Partner/Corporate Office Information to be completed: (attach separate list if necessary)**

Full Legal Name: \_\_\_\_\_ Full Legal Name: \_\_\_\_\_

Residence: \_\_\_\_\_ Residence: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ DOB \_\_\_\_\_ Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Social Security No: \_\_\_\_\_ Social Security No: \_\_\_\_\_

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## Occupational License Application Instructions

### 1. PERSON REQUIRED TO FILE APPLICATION:

Each person or business entity engaged in any occupation, trade or profession or other business activity conducted for gain or profit or recognized by the IRS as a non-profit organization in the City shall first make application in writing to the City's Office of Occupational Licenses, on forms provided by the City, before an applicant shall commence any activity subject to occupational license fees in the City. This application and the fees described apply to entities conducting business in the City that meet the definition of a local business in the City Ordinance as well as those entities defined as a Transient General Contractor that do not meet the definition of a local business. Local businesses that do not own the business site must provide a valid lease from the property owner for a period of over six (6) uninterrupted months.

### 2. PAYMENT OF REGISTRATION FEE:

A **one-time** business registration fee of \$25 will be made at the time of application. A business changing names or adding an additional dba, or an assumed name shall notify the License Division of the name change but will not be required to pay a new license registration fee. This applies to a true name change only. Any change in entity or ownership shall require the completion of a new application and registration fee. Mail to Occupational Business License Office at PO Box 671, Henderson KY 42419 or visit the City Municipal Building at 222 First St, Henderson KY 42420. If you have any questions, please phone 270-831-1290 Ext 2229.

### 3. REQUIREMENTS FOR \$275.00 BUSINESS REGISTRATION CASH BOND:

- A. Transient General Contractors In addition to the Occupational License Application Fee, General Contractors that do not meet the definition of a local business shall be required to post a cash bond in the amount of \$275.00 with the City at the time of registration. **Read Item C concerning the time limit and process to apply for a refund on bond.**
- B. Business deemed local but have no business site in the City A business that had been deemed to be local by producing sufficient evidence to show its proximity to the City would constitute regular visits but does not own its business site in the City Limits or does not have a valid license for its business site in the City for a period of over six (6) uninterrupted months shall be required to post a cash bond of \$275.00 with the City at the time of registration. **Read Item C concerning the time limit and process to apply for refund on bond.**
- C. Bond Refund: Any person or business entity required to file a \$275.00 cash bond shall have a minimum of one (1) year and a maximum of two (2) years from the date of bond payment to request a refund of the bond. Upon receipt of the refund request, if all license fee returns are deemed to be filed and paid in full, a refund of the bond will be issued. If at any time during the two-year period a return is not filed or the occupational taxes are not paid, the bond shall be retained by the City and no portion shall be eligible for a refund. **At the end of the two-year period, if no request has been made for a refund the remaining bond payment shall be forfeited to the City.**

### 4. APPLICATION OF WITHHOLDING AND NET PROFIT FEES:

A license fee at the rate of 1.49% applies to the following within the City of Henderson, KY:

- A. Salaries, wages, commissions and other compensations for work or services rendered in any activity (referred to as Employee Withholding Fee).
- B. Income from the operation of a business or enterprise after providing for all costs and expenses incurred in the conduct thereof referred to as Net Profit Fee.

### 5. PENALTIES:

Any person or persons who shall attempt to do anything whatsoever to avoid the payment of the whole or any part of the license fee, shall become liable to the City for the payment plus interest and penalty charges as described in ORDINANCE 37-21 of the City Occupational Tax Ordinance.