

City of Henderson, Kentucky

Nonprofit Sponsor's Application for an Event Business License

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

PH. (270) 831-1290 or Fax (270) 827-6054* Web site: www.hendersonky.gov

APPLICANT INFORMATION

APPLICANT NAME: _____
ADDRESS: _____ EMAIL ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE: Please list Primary DAY: _____ CELL: _____
Contact's phone numbers. NIGHT: _____ FAX: _____

SPONSOR NAME: _____
ADDRESS: _____ EMAIL ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE: Please list Primary DAY: _____ CELL: _____
Contact's phone numbers. NIGHT: _____ FAX: _____

PLEASE ATTACH A LIST OF THE NAME, ADDRESS, AND TELEPHONE NUMBERS OF THE SPONSORING ORGANIZATION'S AUTHORIZED REPRESENTATIVES.

EVENT COORDINATOR: _____
ADDRESS: _____ EMAIL ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE: Please list Primary DAY: _____ CELL: _____
Contact's phone numbers. NIGHT: _____ FAX: _____

EVENT INFORMATION

EVENT NAME: _____

EVENT LOCATION: _____

EVENT TYPE:

☐FESTIVAL/EVENT ☐ENTERTAINMENT ☐PARADE ☐RALLY/DEMONSTRATION
☐WALK/RUN/BIKE ☐BLOCK PARTY ☐GAMES/RIDES ☐COMPETITION/TOURNAMENT
☐OTHER _____

EVENT DESCRIPTION: Give brief description of the event below:

EVENT NAME: _____ DATES: _____

EVENT INFORMATION

EVENT DURATION:

DATES THE EVENT
WILL BE IN OPERATION

STARTING DATE: ____/____/____ DAY OF THE WEEK _____

Is this a new event? ☐ Yes ☐ No

Total Attendance: _____

Peak Attendance: _____

Hours of Operation

If event lasts more than 3 days please submit additional hours of operation.

START		END	
Day 1:	____:____ __M	____:____ __M	
Day 2:	____:____ __M	____:____ __M	
Day 3:	____:____ __M	____:____ __M	

Print Applicant Name:

Applicant Signature:

Print Applicant Name:

Applicant Signature:

Revised 01/01/2026

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.

2. PAYMENT OF REGISTRATION FEE:

The one-time business registration fee of \$25 is covered by the Event Holder with the Event Business License Permit. The Event Business License Application can be mailed to the Business License Office at PO Box 671, Henderson KY 42419, emailed to the Occupational Tax Administrator at argibson@hendersonky.gov or visit the City Municipal Building at 222 First St, Henderson KY 42420. If you have any questions, please call 270-831-1290.

3. APPLICATION OF WITHHOLDING AND NET PROFIT FEES:

A license fee at the rate of 1.65% 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.

4. 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.