



CITY OF OAK GROVE
P.O. BOX 250
OAK GROVE, KY 42262
Phone (270) 439-4646
Fax (270) 439-1201



APPLICATION FOR ADULT OCCUPATIONAL BUSINESS LICENSE

ORDINANCE NO. 2008-05

APPLICANT INFORMATION

NAME OF APPLICANT: _____
TRADE/STAGE NAME: _____
MAILING ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
TELEPHONE # _____
DATE OF BIRTH: _____ DRIVERS LICENSE #: _____

ACCOUNTING PERIOD

_____ Calendar Year _____ Fiscal Year _____ / _____ to _____ / _____ (please specify beginning of year)

AMOUNT OF LICENSE FEE

The minimum license fee due with this application is \$100.00

- No license will be issued to any entity or individual owing the City of Oak Grove delinquent taxes, Occupational or Payroll withholding license fees, any other fees, taxes or assessments of any type.
- Two proofs of ID are required, including a valid picture I.D.
- Payments are required in CASH only.

I hereby certify all information and statements herein are true and correct.

SIGNATURE: _____
PRINT NAME: _____
DATE: _____

OFFICIAL USE:
License # _____
Invoice # _____
Date: _____