



CITY OF OAK GROVE

## ADULT OCCUPATIONAL LICENSE TAX RENEWAL

**ORDINANCE # 2008-05**

Name: \_\_\_\_\_

Trade/Stage Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Check If Final Return

\_\_\_\_\_  
**PREPARER'S NAME**

\_\_\_\_\_  
**PREPARER'S PHONE NUMBER**

### WORKSHEET FOR REPORTING GROSS RECEIPTS

1. Total gross receipts for the year: \$ \_\_\_\_\_  
**(A copy of Federal Form 1040, Schedule "C" or Kentucky Form 741, 765 or 720 as applicable, or a copy of the business's state sales tax returns for the appropriate year is required.)**
2. **PROFESSIONAL:** Multiply line 1 by .38% (.0038) Enter result here: \$ \_\_\_\_\_
3. The **MINIMUM FEE** for this license is: **\$100.00**
4. Enter the **GREATER** amount of line 2 or line 3 here: \$ \_\_\_\_\_
5. **PENALTY** (\*5% per month of line 4)(\$25 Minimum) \$ \_\_\_\_\_
6. **INTEREST** (\*\*12% per year, or 1% per month) \$ \_\_\_\_\_
7. Total license fee paid (Lines 4, 5, and 6) \$ \_\_\_\_\_

**DISCLAIMER:** Please be advised that the above Worksheet for Reporting Gross Receipts is a guideline to assist in the calculation of yearly tax payments. If any of the above calculations are underestimated, license fees will be underpaid and a late payment **\*PENALTY OF 5% per month (Not to exceed twenty-five 25% of the total tax due; However the penalty shall not be less than twenty-five dollars \$25 and \*\*INTEREST OF 12% PER YEAR, OR 1% PER MONTH WILL BE ASSESSED AGAINST ANY LICENSE FEE BALANCE UNPAID BY THE DUE DATE.**

**INSTRUCTIONS**

- Enter the legal name and mailing address of the licensee.
- Please check if Final Return.
- Enter the licensee’s Federal Identification number and telephone number.
- Enter the Mailing Address in Oak Grove.
- Enter the name and phone number of the preparer, or the person to be contacted if additional information is required.
- Enter the licensee’s fiscal year end.
- A copy of Federal Form 1040, Schedule “C” or Kentucky Form 741, 765 or 720 as applicable, or a copy of the business’s state sales tax returns for the appropriate year.

**SCHEDULE FOR OCCUPATIONAL LICENSE TAX PAYMENTS**

<b><u>FISCAL YEARS</u></b> <b><u>ENDING</u></b>	<b><u>LICENSE FEE</u></b> <b><u>PAYMENTS DUE</u></b>	<b><u>FISCAL YEARS</u></b> <b><u>ENDING</u></b>	<b><u>LICENSE FEE</u></b> <b><u>PAYMENTS DUE</u></b>
DEC. 31	APR. 15	JUNE. 30	OCT. 15
JAN. 31	MAY. 15	JULY. 31	NOV. 15
FEB. 28	JUNE. 15	AUG. 31	DEC. 15
MAR. 31	JULY. 15	SEPT. 30	JAN. 15
APR. 30	AUG. 15	OCT. 31	FEB. 15
MAY. 31	SEPT. 15	NOV. 30	MAR. 15

- **No license fee 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.**
- **Upon renewal two proofs of ID are required, including a valid picture I.D.**
- **All renewals are required in cash.**
- **Any outstanding fees, penalty and/or interest will be charged at the time of renewal.**

**I CERTIFY THAT THE INFORMATION SUBMITTED ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE.**

<b>Signature</b>	<b>Title</b>	<b>Date</b>
<b>Printed Name</b>		

OFFICIAL USE:

License # \_\_\_\_\_

Invoice # \_\_\_\_\_

Date: \_\_\_\_\_