

OCCUPATIONAL LICENSE TAX RENEWAL

ORDINANCE # 2008-05

Check If Final Return

ON	E PAST - S	REAL PROPERTY.
TY O		SACTH TUCK
2		
	FOUNDED 1829 CORPORATED	3974

Name o	of Business			
Mailing	g Address:			
City:	State:			Zip:
Busines	ss Address:			
SSN/FI	EIN: Kentucky	Stat	te Lic	ense #
Phone:	ne: Contact Name:			
Current	t Number of Employees: Fulltime: Part-time:			
PREPA	RER'S NAME			PREPARER'S PHONE NUMBER
WORK	SHEET FOR REPORTING GROSS RECEIPTS			
	Total gross receipts for the year: Oak Grove Only of Federal Form 1040, Schedule "C" or Kentucky Form 741, 765 or 720 a for the appropriate year is required.)	as ap	\$ pplicab	le, or a copy of the business's state sales tax
2.	Total Beer and /or Liquor sales for the above year:	9	\$	
3.	Total taxes paid on gasoline sales for the above year:	\$	\$	
4.	Subtract lines 2 and 3 from line 1. Enter the results here:		\$	
5.	WHOLESALE: Multiply line 4 by .06% (.0006) Enter result here:		\$	
	RETAIL: Multiply line 4 by .15% (.0015) Enter result here:	\$	\$	
6.	PROFESSIONAL: Multiply line 4 by .38% (.0038) Enter result her The MINIMUM FEE for this license is: \$100.00	re: \$	\$	
7.	Enter the GREATER amount of line 5 or line 6 here:	\$	\$	

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 considered underpaid and penalties will be assessed.

PENALTY (*5% of line 7) (\$25 Minimum)

Total license fee paid (Lines 7, 8, and 9)

INTEREST (**12% per year, or 1% per month)

8.

9.

10.

SCHEDULE FOR OCCUPATIONAL LICENSE TAX PAYMENTS					
FISCAL YEARS	LICENSE FEE	FISCAL YEARS	LICENSE FEE		
ENDING	PAYMENTS DUE	ENDING	PAYMENTS DUE		
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		

DENIAL TO DELINQUENT TAXPAYERS

NO LICENSE WILL BE ISSUED TO ANY BUSINESS OR BUSINESS OWNER WHICH OWES THE CITY OF OAK GROVE ANY DELINQUENT REAL ESTATE OR TANGIBLE TAXES, ANY OCCUPATIONAL OR PAYROLL WITHHOLDING LICENSE FEES, ANY OTHER FEES, TAXES, OR ASSESSMENTS OF ANY KIND.

I CERTIFY THAT THE INFORMATION SUBMITTED ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE.					
Signature	Printed Name				
Title	Date				

- ❖ Make checks payable to The City of Oak Grove.
- ❖ Send payments to P.O. Box 250 Oak Grove, KY 42262.

If you want to overnight a check or send through UPS, FedEx then our physical address is 8505 Pembroke Oak Grove Rd Oak Grove, KY 42262.

OFFICIAL USE:	
License #	
Invoice #	
Date:	