

Occupational License Application

Application fee of \$75 required with submission of form -- new businesses only



City of Maysville
216 Bridge St., Maysville, KY 41056
606-564-9419 fax 606-564-9416

To ensure that your account information is accurate, we ask that you complete all fields and return this form.

Application date: _____

Date business begins operation: _____

Business name: _____

Owner's name: _____

Mailing Address - Licenses

Mailing Address - Payroll Tax

Contact: _____

Contact: _____

Email: _____

Email: _____

Phone: _____

Phone: _____

Fax: _____

Fax: _____

Street or job-site location in Maysville, if different from license address:

Do you have employees? _____

If so, how many? _____

Do you issue 1099s for contractors? _____

If so, attach contact list.

Organized as: _____ Individual

_____ Corporation

_____ Partnership

_____ Non-profit **no fee required of non-profits*

SSN or FEIN: _____

Month fiscal year ends: _____

Describe the nature of your business: _____

If your business in Maysville is temporary, when do you expect it to be complete?

Mo/Yr _____