City of Somerset

306 East Mt. Vernon Street PO Box 989 Somerset, Kentucky 42502 (606)679-6366 (606)679-2481 (FAX)

Business License Application

| ***BUSINESS INFORMATION*** | | | |
|--|--------|-------------------|--|
| Date: | | Type of business: | |
| Business Name: | | | |
| Business Address: | | | |
| City: | State: | Zip: | |
| Business Mailing Address: | | | |
| City: | State: | Zip: | |
| Business Phone Number: | | | |
| Date Started in City: | | | |
| | | | |
| ***OWNER INFORMATION*** | | | |
| Owner Name: | | | |
| Owner Phone Number: | | | |
| Federal Identification Number or Social Security Number: | | | |
| ***CONTENT OTTONG ONLY WYYY | | | |
| ***CONTRACTORS ONLY*** | | | |
| Address of job: | | | |
| Description of work to be done: | | | |
| | | | |
| | | | |
| (all sub-contractors need to have licenses also) | | | |
| | | | |
| ***OFFICE USE ONLY*** | | | |
| Account Number: | | Code: | |
| Cost: Pro-rated cost: | | | |
| Building Inspector Approval: | | | |

*Business license year runs from May 1 to April 30 and is not pro-rated until January 1.

*Please make check payable to City of Somerset

Attention: The cost of the business license paid to the City of Somerset can be deducted from the amount of the net profits owed to Pulaski County for occupational tax. Please return this application or copy with payment. Thank you.