

CITY OF STANFORD 403 EAST MAIN STREET STANFORD, KY 40484 PHONE: (606)365-4500

Form 551 License Year__

APPLICATION FOR OCCUPATIONAL (BUSINESS) LICENSE

<u>Note:</u> Non-profit organizations, federal employees, and entities exempted from the license fee by KRS, and organizations exempted in Section 1-1 of Stanford's Code of Ordinances are not required to purchase a Business License or file a Net Profit License Fee Return. To receive exempt status a copy of your Federal Letter of Exemption must be submitted with this application. Non-profit status does not exempt your organization from Quarterly Occupational Tax reporting.

License fee is \$50 per year and due by January 31 of each year. A 10% penalty will apply February 1-March 31, 40% penalty will apply after March 31.

Payment may be made online at Stanford.ky.gov by ACH (\$1.00 fee), or credit/debit (2.75% fee)

1. Name of Individual Proprietor, Orga	anization, Corporation or par	tnership:	
2. Business name (name business oper	ates under):		
3. Business Location (Street address):_			
City:_		State:	Zip:
4. Mailing Address (if different):			
5. Phone:	Cell:	Fax	
E-mail:			
6. Ownership: (choose one) Sole Propr	rietor Partnership	Corporation	Non-Profit
Limited Liability (Co S-Corporation	Other	
7. List owners, officers, partners, titles	or other administrative head	s including payroll an	d tax preparers:
Name and contact info:			
8. Federal Tax ID No.:		or SSN	
9. Nature or description of business:			
0. Date of start of business:11. Number of employees:			
	Do	you issue 1099's? ye	s no
Quarterly payroll reporting must The tax rate to withho		vees working within t	he City limits of Stanford.
12. Accounting period per federal return Net Profit Reporting for work co	ompleted in the City must	be reported subseque	nt with federal tax filing.
The Net Profit Rate is .65% a	and your yearly business lie	cense fee is a minimu	m net profit payment.
**If your business is located in the city for police and fire emergency notificat			
hereby certify all information herein	is true and correct: Signat	ıre:	Date:
Office Use: License Number:	Amount Paid:	Date:	Cash/Chk: