

CITY OF LAGRANGE

307 W. JEFFERSON STREET
LAGRANGE, KY 40031

www.lagrangeky.net

Phone: (502) 222-1433 Fax: (502) 222-5875

APPLICATION FOR BUSINESS LICENSE

PLEASE PRINT OR TYPE THE INFORMATION REQUESTED BELOW

Name of Business	
Name of Applicant	
Street Address	
City/State/Zip	
Mailing Address	
City/State/Zip	
Phone/Cell Phone	
Type of Business/Profession	

SIGNATURE _____ DATE _____ ACCT#: _____

NAME & TITLE (Print) _____ SS# or Federal ID# _____

I affirm that my gross receipts in LaGrange, Kentucky, which I have reported, or will report in my Federal Tax Return for 2007 were \$_____.

My business in LaGrange, Kentucky was conducted in 2007 for ____ months.

CALCULATE THE AMOUNT YOU OWE IN THE TABLE BELOW

GROSS RECEIPTS	AMOUNT	X	=	=	AMOUNT DUE
First \$500,000.00 or less	\$	X	.0008	=	
Next \$500,000.00 or less	\$	X	.0005	=	
Balance of income \$1,000,000.00 and up	\$	X	.0004	=	
Vending Machines	Number ()	@	\$10.00 Each	=	
Total Amount Due				=	**

**Minimum Business License fee \$55.00

FLAT RATE SCHEDULE

My occupation allows a flat rate as stated below:

ADVERTISING DISTRIBUTOR	\$75.00	
AUCTIONEER	\$10.00 PER DAY/\$55.00 PER YEAR	
BILLBOARD AGENT	\$55.00	
DELIVERY	\$80.00	
ITINERANT MERCHANTS	\$55.00	
ITINERANT PHOTOGRAPHERS	\$10.00 PER DAY/\$65.00 PER YEAR	
PEDDLERS	\$10.00 PER DAY/\$65.00 PER YEAR	
VENDING MACHINES	\$10.00 EACH Total number ()	
TOTAL AMOUNT DUE		

MAKE CHECKS PAYABLE TO THE CITY OF LAGRANGE. MAIL CHECK AND THIS FORM TO CITY OF LAGRANGE,
307 WEST JEFFERSON STREET, LAGRANGE, KY 40031

RENEWALS ARE DUE BY JUNE 1, 2008. A 10% PENALTY IS REQUIRED IF NOT PAID BY JULY 1, 2008.

For Office Use Only

Date Received	License No.	Account No.	Amount	Vending	Penalty	Fee	Total Paid	Cash	Check

THE CITY OF LAGRANGE RESERVES THE RIGHT TO EXAMINE YOUR RECORDS FOR ACCOUNTABILITY