

BOYD COUNTY FISCAL COURT

PO BOX 423

CATLETTSBURG, KY 41129

606 739-0164

QUESTIONNAIRE FOR BOYD COUNTY OCCUPATIONAL LICENSE

Since every business must register and be assigned an account number, please complete the questionnaire below and return it to this office. Make checks payable to **Boyd County Fiscal Court**

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1. Business or Trade Name _____
 2. Local Business Address _____
(No P.O. Boxes) _____
 3. Forms Mailing Address _____
(If different from #2 or
a PO Box) _____
 4. Business Telephone No. _____ Fax _____ E-Mail _____
Ownership: _____ Sole Proprietorship _____ Partnership _____
_____ C Corp. _____ S Corp _____ Non Profit
 6. Owners/Partners Names _____
Corp. Officers & Titles _____
 7. Owner Soc. Sec. Number _____ - _____ - _____ or/ FIN _____ - _____
 8. Nature of Business _____
 9. Date Business Started ____ / ____ / ____
(In Boyd County)
 10. Number of Employees _____
Contract Labor (List names and address on back or separate sheet)
 11. IRS Accounting period:
_____ Calendar Year Ends 12/31 _____ Fiscal Year Ends ____ / ____
 12. List any other business entities in Boyd County

 13. ___ Elect to pay Net Profit _____ Elect to pay Fixed Rate based on number of employees

I hereby certify all information & statements herein are true and correct.

Signature & Title