



Office of Tax Administrator
Tammy M. Hanlon

Application for Business License

1. Name of Business: _____
Applicant's Name: _____
Applicant's Address: _____
Applicant's Telephone Number: _____
2. (A) The name of the individual having management authority or supervision of the applicant's business during normal operating hours.

(B) Management/Supervisor's local address: _____

(C) Management/Supervisor's permanent address: _____

(D) The capacity in which such individual will act: _____
3. The name and address of the person, if any, for whose purpose the business will be carried on and, if a corporation, the state of incorporation:

4. The time period or periods during which it is proposed to carry on applicant's business:

5. (A) The nature, character, and quality of the goods or services to be offered for sale or delivery:

(B) If goods, their invoice value and whether they are to be sold by sample as well as from stock:

(C) If goods, where and by whom are such goods manufactured or grown, and where such goods are at the time of application:

6. The nature of the advertising proposed to be done for this business:

7. (A) Whether or not the applicant, or individual identified in question 2(A) above, or the person identified in question 3 have been convicted of any crime or misdemeanor and, if so, the nature of each offense and the penalty assessed for each offense:

(B) Applicants for peddler or solicitor license may be required to provide further information concerning the following items, in addition to that requested under question 7(A) above:

1. A description of the applicant:
2. A description of any vehicle proposed to be used in the business, including its registration number, if any.

(C) All applicants for licenses required by this chapter shall attach to their application the following:

1. If required by the city, copies of all printed advertising proposed to be used in connection with the applicant's business:
2. If required by the city, credentials from the person, if any for which the applicant proposes to do business, authorizing the applicant to act as such representative.

(D) Applicants who propose to handle food items shall also attach to their application, in addition to any attachments required under question 7(C) a statement from a licensed physician, dated not more than ten days prior to the date of application, certifying the applicant to be free of contagious or communicable disease.

(E) Minimum license fee due is \$50.00 (fifty) dollars.

I have read and understand that the application and information provided above is correct.

Signature of the applicant: _____

Dated: _____

This application is approved by: _____

Tax Administrator

City of Hazard
P. O. Box 420
Hazard, KY 41702
(606) 436-3171