

City of Warsaw
Business License Application
303 East Main St., P.O. Box 785
Warsaw, KY 41095
859-567-5900

Business Licenses are due on July 1 and expire June 30th of each year. Please fill this application out completely and return, along with payment, to the above address. Contractors must show proof of Worker's Compensation and General Liability Insurance.

1. **Business or Individual Name:** _____
(Name business operates under)
2. **Type of Business:** _____
3. **Contact Name:** _____ **Phone:** _____
(If your name was used above, enter the business name you are connected with)
4. **Business Address:** _____
5. **Mailing Address:** (if different): _____
6. **Email Address:** _____
7. **Number of Employees Working in Warsaw:** _____
 - If you have not set up an Occupational Fee Account, please contact Warsaw City Hall at 859-567-5900, cityinfo@cityofwarsaw.org, or you can find the form on our website at warsaw.ky.gov. The Occupation form is mailed out quarterly. The tax rate to withhold is 1%.

Signature	Title	Date
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If your business is located in the city limits of Warsaw, we would like emergency after hour contact information kept on file. This information will only be used in case of emergency regarding your business.

Contact Name: _____ Phone Number: _____

Do you have an Alarm System ? YES or NO

Alarm system contact information : _____

Office Use Only

License Number: _____ **Amount Due:** _____ **Amount Paid:** _____

Date Paid: _____ **Source of Payment:** Cash or Check # :