

City of Benton Business License Application 1009 Main St Benton, KY 42025 Phone (270)527-8677

Business Licenses are due on January 1 and expire December 31 of each year. Please fill this application out completely and return, along with payment, to the above address or pay online at benton.ky.gov. Contractors must show proof of Workers' Compensation and General Liability Insurance.

1. Business or Individual Name:

Penalties as follows: 10% beginning January 31 – March 1; 30% from March 2 – March 31; 50% beginning April 1

| | (Name business op | erates under) | | | | |
|---------------|--|--|-----------------|---|------------|--|
| 2. | Type of Business: | | | | | |
| 3. | | used above, enter the bus | | Phone: | one: | |
| 4. | 4. Business Address: | | | | | |
| 5. | 5. Mailing Address (if different): | | | | | |
| 6. | 6. Date Business Established: | | | | | |
| 7. | Number of Empl | Number of Employees Working in Benton: | | | | |
| | cityinfo@cityofbenton.org, or you can find the form on our website at benton.ky.gov. The Earnings Tax form is to be completed by all businesses operating in the City of Benton, KY, with employees and shall be used for the purpose of establishing an account for reporting City of Benton, KY earnings tax. The tax rate to withhold is 0.6% of gross wages. | | | | | |
| Signature | | | Title | Date | | |
| - | | the city limits of Benton, v | | rafter hour contact information kept on f | file. This | |
| Contact Name: | | | Phone Number: | | | |
| Do you | have an alarm Syster | n? YES or NO | | | | |
| Alarm s | ystem contact inform | nation: | | | | |
| | | | | | | |
| | | | Office Use Only | | | |
| License | Number: | Amount Due: | Amount Paid | d: Date Paid: | | |
| | Source of Payment | : CASH or CHECK Check # | tInsuranc | ce Certification Form: | | |