

MCCRACKEN COUNTY TAX ADMINISTRATOR

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mccrackencounty.org

APPLICATION FOR MCCRACKEN COUNTY OCCUPATIONAL TAX ACCOUNT

Since every business must register and be assigned an account number, please complete the questionnaire below and return it to this office. Non-profit organizations will not be required to file the Netprofit License Fee Return provided a copy of an Internal Revenue Service (IRS) letter of exemption is submitted to support the non-profit status.

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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)

4. Business Telephone No. _____ Fax _____ Cell # _____
Ownership: _____ Sole Proprietorship _____ Partnership _____ C Corp. _____ S Corp _____ Non Profit
5. Owners/Partners Names _____
Corp. Officers & Titles _____
6. Owner Soc. Sec. Number _____ - - _____ Federal _____ - _____
7. Nature of Business _____
8. Date Business Started ____/____/____
(In McCracken County)
9. Number of Employees _____
Contract Labor (List names and address on back or separate sheet)
10. IRS Accounting period:
_____ Calendar Year Ends 12/31 _____ Fiscal Year Ends ____/____
11. List any other business entities in McCracken County

Copy of photo ID of individual working in County required.
