



City of West Point

Mayor William C. Ash

509 Elm Street
West Point, KY 40177
www.westpoint.ky.gov

Phone (502) 922-4260
Fax (502) 922-4262
TTY (502) 922-9780

email info@westpointky.org

Business License Application

Calendar Year _____

City Business License Number _____

Name of Business _____

Owner/Owners _____

Federal Employer ID _____ Social Security Number _____

Check Which Apply: Individual Owner _____ Partnership _____ Corporation _____

Is Your Business Permanent _____ Temporary _____

Business Address _____

City, State, Zip _____

Telephone Number _____ Second Phone Number _____

Fax _____ Email _____

Nature of Business _____

Business start date _____ Hours of operation _____

Business is on the property that is owned _____ leased _____

If property is leased, property owners Name, Address and Phone:

I hear by certify that the information provided herein is true and accurate to the best of my knowledge. I understand obtaining a business license does not guarantee my right to do business at the location indicated. It is understood that the City of West Point has an occupational license fee on net profit from business conducted within the city, A minimum license fee must be paid and an annual return filed whether or not the business shows a profit. It is also understood that the license fee must be withheld from earnings of employees and remitted to the city quarterly.

Signature _____ Date _____