

APPLICATION FOR OCCUPATIONAL LICENSE

(\$50.00 FEE)

Due on or before July 1<sup>st</sup>

Every business entity subject to the Occupational License Fee is required to complete this application and return it with \$50.00 to the City Clerk of Hickman. The \$50.00 fee is not required of nonprofit organizations: however, the license form is still required to be returned. The following information is necessary for our records.

Date \_\_\_\_\_
Applicant \_\_\_\_\_ Business Name \_\_\_\_\_
Address \_\_\_\_\_ Address \_\_\_\_\_
City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_
Phone \_\_\_\_\_ Phone \_\_\_\_\_
Email \_\_\_\_\_ Mailing Address (if different from above)
Accounting Period: Address \_\_\_\_\_
\_\_\_\_\_ Calendar Year City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_
\_\_\_\_\_ Fiscal Year \_\_\_\_/\_\_\_\_ Federal Tax EID # \_\_\_\_\_

Is Business a: \_\_\_ Individual \_\_\_ Sole proprietorship \_\_\_ Partnership
\_\_\_ S Corporation \_\_\_ C Corporation \_\_\_ LLC
\_\_\_ Other (Describe) \_\_\_\_\_

Nature of Business \_\_\_\_\_
Date Business or operations started in the City of Hickman \_\_\_\_/\_\_\_\_/\_\_\_\_
M D Y

Do you have or will you have employees working in the City of Hickman? \_\_\_yes \_\_\_ no
If so, the City of Hickman's Payroll Tax to be withheld is 1.5%
Number of Employees \_\_\_\_\_

I hereby certify that all information and statements are true and correct.

\_\_\_\_\_  
Name (Printed) Signature Date

Office Use Only
Account# \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_ Employee's Initials \_\_\_\_\_