

Logan County Occupational/Net Profit License Director

LOGAN COUNTY FISCAL COURT

P.O. Box 236 Russellville, KY 42276  
Phone: 270-726-4667 Fax: 270-726-4668  
EMAIL: [sc.marshall@logancountyky.gov](mailto:sc.marshall@logancountyky.gov)

Name of Business/ Individual: \_\_\_\_\_

Physical Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

Phone # \_\_\_\_\_ Fax #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Description of Business/Activity \_\_\_\_\_

Business Entity: Individual Partnership Corporation LLC Trust/Fiduciary Other  
(circle one)

Federal I.D. Number or SS#: \_\_\_\_\_

Approximate date Business or Job Will Start/Started in Logan County \_\_\_\_\_

Accounting Period Per Federal Return  Calendar Year OR Fiscal Year End Date \_\_\_\_\_  
\* Check calendar year if you file taxes by April 15<sup>th</sup>

Will you have Employees Working in Logan County?  Yes  No

If yes, do you want to file/pay payroll tax returns?  Monthly  Quarterly

Do you have any contract labor/ those who will receive 1099?  Yes  No

**\* Copies of W2's and 1099's must be submitted to the County by February 28<sup>th</sup> following each calendar year along with an Annual Reconciliation form, which is mailed out in January. If you have CONTRACT LABORERS, you must inform them that each individual must register to do business in the County.**

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**PLEASE PRINT:**

Name of Business Owner(s): \_\_\_\_\_

Business Owners Home Address: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_