

CITY OF ST MATTHEWS
PO BOX 7097
LOUISVILLE KY 40257-0097 (502)
895-9444
BUSINESS LICENSE TAX DEPARTMENT
(502) 899-2515

YEAR _____

Emailed Forms **Must Send in Payment** to be processed

BUSINESS LICENSE APPLICATION

ANNUAL RENEWAL DUE: APRIL 30

OFFICIAL USE ONLY

CHECK #

AMOUNT PAID

DATE PAID

IMPORTANT NOTICE: READ CAREFULLY BEFORE COMPLETING THIS FORM

BUSINESS/APPLICANT NAME: _____

BUSINESS ADDRESS: _____
City, State, Zip Telephone Number

EMAIL ADDRESS: _____

MAILING ADDRESS: _____
(If Different than Above) City, State, Zip Telephone Number

CONTACT PERSON: _____
Telephone Number

PRINCIPAL BUSINESS ACTIVITY: _____

ACCOUNT #	Select the Appropriate Item		
	NEW BUSINESS (Fee = \$25.00)	RENEWAL (See Instructions)	FINAL RETURN
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SEE REVERSE SIDE FOR INSTRUCTIONS (for business license renewal)

- 1) GROSS RECEIPTS EARNED IN ST. MATTHEWS:
(LESS ALCOHOL SALES) _____
- 2) GROSS RECEIPTS TAX TO BE PAID:
BASED ON TAX TABLE ON REVERSE SIDE _____
- 3) 50 PERCENT DISCOUNT PAYMENT:
(If Paid By April 30) _____
- 4) PENALTY:
10% OF LINE 2 IF PAID AFTER APRIL 30 _____
- 5) INTEREST:
1.5% OF LINE 2 FOR EACH MONTH OR PART THEREOF BEGINNING MAY 1 _____
- 6) TOTAL PAYMENT DUE: _____

I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE HEREIN AND ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT AND COMPLETE, TO THE BEST OF MY KNOWLEDGE.

(Date)

SIGNATURE OF RETURN PREPARER

SIGNATURE OF LICENSEE

PRINT NAME

PRINT NAME

TELEPHONE NUMBER

TELEPHONE NUMBER

CITY OF ST. MATTHEWS - BUSINESS LICENSE**INSTRUCTIONS**

DATE DUE: The St. Matthews Gross Receipts Business License Application is to be completed and payment submitted on April 30 of each year in order to renew a business license. Payment must be received by **April 30** to receive the 50% discount.

PENALTY & INTEREST: A penalty of 10% of the tax due will apply if payment is made on or after May 1. Additionally, interest is charged at the rate of 1.5% per month or part thereof.

GENERAL: Business licenses are required for all businesses located in the City of St. Matthews and/or businesses coming into the City to conduct work. Each separate location is to apply for their individual licensing. Each business location in the City of St. Matthews are to report gross receipts from that location. **Receipts from the sale of alcoholic beverages are not to be computed in gross receipts.**

The filing fee for the first year of business is \$25. Subsequent renewal fees are based on the gross receipts. See tax table below:

<u>TAX TABLE</u>			
RECEIPTS LESS THAN	\$30,000.00	=	\$ 25.00
\$30,001.00 or less than	\$40,000.00	=	\$ 30.00
\$40,001.00 or less than	\$50,000.00	=	\$ 40.00
\$50,001.00 or less than	\$60,000.00	=	\$ 50.00
\$60,001.00 or less than	\$70,000.00	=	\$ 60.00
\$70,001.00 or less than	\$80,000.00	=	\$ 70.00
\$80,001.00 or less than	\$90,000.00	=	\$ 80.00
\$90,001 or less than	\$100,000.00	=	\$ 90.00

All receipts in excess of \$100,000.00 are to be taxed at the rate of fifty cents (.50) for each \$1,000 or fraction thereof. See Example Below. (Subtract \$100,000. Multiply by .0005. Add \$90.00)

$$\begin{aligned} \text{Receipts of } \$100,001 \text{ or more:} & \quad \$150,000.00 & = & \quad \$ 115.00 \\ (\$150,000 - \$100,000 = \$50,000 \times .0005 = 25.00 + \$90) & & & \end{aligned}$$

PAYMENTS: We cannot accept credit card payments at this time. Please send payment by check, made payable to the City of St. Matthews. Mail to the City of St. Matthews, Business License Department, PO Box 7097, Louisville KY 40257-0097.

QUESTIONS: Please contact the City of St. Matthews Business License Department (502 -899-2515) during normal business hours of 7:30 AM to 4:00 PM, Monday through Thursday, 7:30 AM to 11:30 AM Friday. City Hall address - 3940 Grandview Avenue, Louisville KY 40207 (502 895-9444).

OTHER TAXES: The City of St. Matthews has an Occupational Employee Withholding Tax, Professional License Tax, and Real Estate Tax, in addition to the Gross Receipts Tax. If any additional information is needed, please call the appropriate clerk.

YOUR BUSINESS LICENSE WILL BE ISSUED UNDER THE PROVISIONS OF THE CITY OF ST. MATTHEWS CODE CHAPTER 110. YOU ARE CAUTIONED THAT THE LICENSE DOES NOT PERMIT OPERATION OF A BUSINESS IN VIOLATION OF OTHER MUNICIPAL CODE SECTIONS. YOUR BUSINESS LOCATION WILL BE CHECKED BY ZONING AND, IF NECESSARY, FIRE DEPARTMENT OFFICIALS. IF YOU HAVE ANY DOUBT THAT YOUR BUSINESS LOCATION CONFORMS WITH THE REQUIREMENTS OF THE MUNICIPAL CODE ADMINISTERED BY THESE DEPARTMENTS, YOU ARE URGED TO CONTACT THESE DEPARTMENTS FOR FURTHER INFORMATION BEFORE FILING THIS APPLICATION FOR A BUSINESS LICENSE. **LICENSE FEES ARE NON-REFUNDABLE.**

THE BUSINESS LICENSE DEPARTMENT IS TO BE NOTIFIED IMMEDIATELY IF YOUR BUSINESS MOVES FROM THE CITY, HAS A CHANGE OF OWNERSHIP, NAME CHANGE OR CHANGE OF ADDRESS.

BL2. REV.
10/2013

RETURN TO THE ATTENTION OF BUSINESS LICENSE/OCCUPATIONAL TAX

P.O. BOX 7097

ST. MATTHEWS, KENTUCKY 40257-0097