

**BALLARD COUNTY QUESTIONNAIRE AND INITIAL REPORT  
FOR OCCUPATIONAL LICENSE FEE**

WE REQUEST THAT EACH BUSINESS IN BALLARD COUNTY COMPLETE THE QUESTIONNAIRE BELOW AND RETURN TO THE BALLARD COUNTY TREASURER'S OFFICE BY:

EMAIL – [BCJUDGE@BRTC.NET](mailto:BCJUDGE@BRTC.NET) FAX – 270-335-3010

MAIL TO: PO BOX 276, WICKLIFFE, KY 42087.

1. BUSINESS OR TRADE NAME \_\_\_\_\_

2. LOCAL BUSINESS ADDRESS \_\_\_\_\_

3. HOME ADDRESS \_\_\_\_\_

4. MAILING ADDRESS \_\_\_\_\_  
(WHERE QUARTERLY FORMS ARE TO BE MAILED)

5. TELEPHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

6. EMAIL ADDRESS \_\_\_\_\_

7. BUSINESS FORM      SOLE PROPRIETOR      PARTNERSHIP      NON-PROFIT  
(PLEASE CIRCLE ONE)      CORPORATION      OTHER

8. NAME OF OWNER(S) \_\_\_\_\_

9. SOCIAL SECURITY NUMBER OR FEDERAL ID NUMBER \_\_\_\_\_

10. NUMBER OF EMPLOYEES \_\_\_\_\_ SEASONAL \_\_\_\_\_ PART-TIME \_\_\_\_\_ FULLTIME \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE