

## CITY OF MURRAY BUSINESS LICENSE APPLICATION

104 North 5th • Murray, KY 42071 • Phone 270-762-0330 • Fax 270-762-0331 • www.murrayky.gov

Check One: New BusinessSecondary Business/Additional LocationRenewal New Owner/Transfer Information Change(s)  Business Name: Phone:
Business Name:
Owner(s): Email:
Business Address:
City: State: Zip: Is this address a Residence? Yes No
Mailing Address: City: State: Zip:
Check Ownership Type:Sole ProprietorPartnershipCorporationLLCLLP
Business Identification # (Tax ID#, EIN, or last 6 SSN): * Open/Start Work Date:
Describe Type of Business:
On-Site Manager: Will you have any signage on the premises or at any work site?YesNo
Emergency Contact Name: Phone#:
What do you estimate your yearly net profit sales to be? \$0 - \$300,000\$300,001 - \$600,000\$600,000\$600,000\$
Affidavit of Gross Rental Income will need to be completed in order to qualify for rates associated with ranges listed below:
If you operate rental property – Gross Rental Income: \$0 - \$10,000\$10,000 - \$25,000
*A separate application is needed for all businesses that operate under the above business identification number.
I declare under penalty of perjury that the above application is true and correct to the best of my knowledge. I certify that I will
operate my business in accordance with all applicable federal, state, and city laws and regulations and permit enforcement
authority onto business property of such laws and regulations.
Signature:
OFFICIAL USE ONLY
Zoning Location: CUP Required:YesNo Signage:YesNo Fire Inspection Fee: \$
Approved By: Date: Fire Inspection Invoice #:
Classification: Fee Amount:\$ Business License #:  Comments: