**QUESTIONNAIRE FOR CITY OF CYNTHIANA LICENSE FEE ACCOUNT**

Every business must register and be assigned an account number. Please complete this questionnaire and return to the City Clerk's office. A non-profit organization will not be required to file the Net Profits License Fee provided they furnish a copy of an IRS letter of exemption.

1. Business or trade name _____

2. Physical location in Cynthiana _____

3. Billing address_____

4. Telephone number_____ e-mail address:_____

5. Ownership: _____ Sole Proprietorship _____ Partnership

_____ Corporation _____ Non-Profit

6. Owners/Partners names_____

7. Owner social security number _____-_____-_____ Federal TIN _____

8. Nature of Business_____

9. Date business started _____ Number of Employees_____

(If temporary-How long expected to be working in Cynthiana)_____

10. IRS Accounting Period _____Calendar year end (12/31)

_____ Fiscal year end

11. List all other business entities in the City of Cynthiana. Provide details about nature of business or service conducted in Cynthiana.

_____

12. List names and phone numbers of individuals to be contacted in case of an emergency who could provide keys and information for E-911 operators.

_____

Thank you for your cooperation. If there are any questions, please call 234-7150.

**City of Cynthiana**
**P O Box 67 Cynthiana, Kentucky 41031**
**Fax Number: 859 234-0035**
**Email: autumn.terhune@cynthianaky.com**