

City of Clinton  
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Occupational Licenses Application May 2025 – May 2026

**This Form for Occupational Licenses is Required for ANY Businesses that Operates or Performs Services within The City of Clinton, Kentucky**

Choose one  New Application  Application Renewal

Legal Business Name: \_\_\_\_\_

Trade Name or DBA (If Different than above): \_\_\_\_\_

Brief Description of Business Activity: \_\_\_\_\_

Federal ID No.: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Date Business Started in (City of Clinton): \_\_\_\_\_

Amount Due for Occupational Licenses: \_\_\_\_\_ (\*\*Please contact City Hall for Amount Due\*\*)

**Payments can be mailed to the above address, along with a self-addressed envelope to return occupation licenses.**

**Primary Business Address or Corporate Headquarters**

Contact Name: \_\_\_\_\_

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

City, State, & Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Quarterly Payroll Withholding Forms**

**If your Quarterly Payroll Withholding Forms need to be sent to your Tax Agency or Payroll Specialist, Please list them below.**

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

I hereby certify that I am duly authorized to act for the application and the statements contained herein are true and complete. Verification will be issued upon processing completed application.

\_\_\_\_\_

If you have **NO EMPLOYEES**, you will not receive a quarterly coupon, but please complete this registration form and return it to the address, fax number, or e-mail address above. If you employ someone during the year, it is your responsibility to notify The City of Clinton and begin withholding the applicable 1.00% payroll tax, which is to be remitted quarterly. If you have any questions, you can contact The City of Clinton.

**Occupational Licenses are Valid from Date Issued to May 10, 2026**