



CITY OF NEWPORT
 DEPARTMENT OF FINANCE & ADMINISTRATION
 LICENSE DIVISION
 (859) 292-3660
www.newportky.gov
LicenseQuestions@NewportKy.Gov

2020

AMENDED RETURN

**AMENDING OF OCCUPATIONAL LICENSE
 FOR CONSTRUCTION PROJECTS OVER \$50,000**

CN-16P

CONSTRUCTION COMPANY: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL: _____

FEDERAL EMPLOYER I.D. _____

PROJECT NAME & LOCATION: _____

DATE PROJECT IS INTENDED TO START: _____

1. TOTAL GROSS COST OF CONSTRUCTION PROJECT: \$ _____

2. TOTAL OF ALL SUB-CONTRACTORS: (SEE FORM CN-5) \$ _____

3. TOTAL GROSS COST OF CONSTRUCTION PROJECT: \$ _____
 (LINE 1 - LINE 2 = LINE 3)

4. LICENSE FEE: (LINE 3 X .0035 = LINE 4) \$ _____

THE MAXIMUM AMOUNT IS \$26,400 FOR THE OCCUPATIONAL LICENSE FEE.

5. MINIMUM PENALTY IS LINE 4 X 25% = LINE 5 \$ _____
 PENALTY APPLIES - IF WORK STARTED PRIOR TO FILING THIS FORM

6. TOTAL REMITTANCE: (LINE 4 + LINE 5 = LINE 6) \$ _____

I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN AND ANY SCHEDULES AND EXHIBITS ATTACHED ARE TRUE AND CORRECT.

SIGNED X _____ TITLE _____

PHONE () _____ DATE ____ / ____ / ____

MAKE PAYABLE TO: CITY OF NEWPORT * DEPT. OF FINANCE * P.O. BOX 1090, NEWPORT, KY 41071-0900

QUESTIONS CAN BE SENT TO LICENSEQUESTIONS@NEWPORTKY.GOV .



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CN-5

GENERAL CONTRACTORS LIST OF SUB-CONTRACTORS

| | |
|---|---|
| GENERAL CONTRACTOR INFORMATION: | |
| COMPANY: _____ | EMAIL: _____ |
| CONTACT PERSON: _____ | PHONE: () _____ |
| STREET _____ | CITY _____ STATE _____ ZIP _____ |
| PROJECT NAME & LOCATION: _____ | |
| DATE THE PROJECT IS INTENDING TO START: _____ | |
| SIGNED: _____ | DATE: ____ / ____ / ____ |
| SUB-CONTRACTOR INFORMATION # 1: | |
| COMPANY: _____ | EMAIL: _____ |
| CONTACT PERSON: _____ | PHONE: () _____ |
| STREET _____ | CITY _____ STATE _____ ZIP _____ |
| AMOUNT OF CONTRACT FOR LISTED PROJECT: | |
| \$ _____ X 0.0035 = \$ _____ | OR \$75.00 Minimum Fee- whichever is GREATER * |
| CONTRACT | CITY FEE |
| SUB-CONTRACTOR INFORMATION # 2: | |
| COMPANY: _____ | EMAIL: _____ |
| CONTACT PERSON: _____ | PHONE: () _____ |
| STREET _____ | CITY _____ STATE _____ ZIP _____ |
| AMOUNT OF CONTRACT FOR LISTED PROJECT: | |
| \$ _____ X 0.0035 = \$ _____ | OR \$75.00 Minimum Fee- whichever is GREATER * |
| CONTRACT | CITY FEE |
| SUB-CONTRACTOR INFORMATION # 3: | |
| COMPANY: _____ | EMAIL: _____ |
| CONTACT PERSON: _____ | PHONE: () _____ |
| STREET _____ | CITY _____ STATE _____ ZIP _____ |
| AMOUNT OF CONTRACT FOR LISTED PROJECT: | |
| \$ _____ X 0.0035 = \$ _____ | OR \$75.00 Minimum Fee- whichever is GREATER * |
| CONTRACT | CITY FEE |

REQUIREMENTS:

* USE FORM CN-2 FOR NEW ACCOUNTS, FORM CN-16 FOR RENEWAL OF EXISTING ACCOUNTS & CN-16P FOR EXISTING ACCOUNTS WITH PROJECTS OVER \$50,000-PREPAYMENT IS REQUIRED

PAYROLL WITHHOLDING OF 2.5% IS REQUIRED ON ALL WAGES EARNED IN THE CITY OF NEWPORT.

ALL 1099 LABOR, WHETHER IT IS A COMPANY OR INDIVIDUAL, IS REQUIRED TO BE LICENSED IN THE CITY OF NEWPORT.

NO BUILDING OR ZONING PERMITS WILL BE ISSUED TO ANY PERSON OR BUSINESS UNTIL ALL INDEPENDENT CONTRACTORS OR SUB-CONTRACTORS HAVE BEEN IDENTIFIED AND LICENSED. USING UNLICENSED SUB-CONTRACTORS CAN RESULT IN THE TEMPORARY SUSPENSION OR PERMANENT REVOCATION OF ANY PERMIT.