CITY OF NEWPORT

DEPARTMENT OF FINANCE & ADMINISTRATION

LICENSE DIVISION

www.newportky.gov

I hereby certify that the information and statements contained herein and any schedules and exhibits attached are true and correct.

Signed X _____

Official Title _____ Date _____

(Owner, Officer, Partner, Member, Agent, etc.)

RENEWAL OF OCCUPATIONAL LICENSE FOR COMMERCIAL RENTAL PROPERTY

CN-18

LICENSE PERIOD JULY 1ST THROUGH JUNE 30TH

License Period Ending **6 / 30 / 2026**

Due On or Before **4 / 15 / 2025**

NAME & _____

ADDRESS _____

OF _____

BUSINESS _____

CITY OF NEWPORT

MAKE PAYABLE TO: DEPT. OF FINANCE
LICENSE DIVISION

RETURN TO: P.O. BOX 711090
NEWPORT, KY. 41071

ACCT# _____

FEIN# _____

FINAL RETURN ☐

CHECK THE BOX IF AN ESTIMATED PAYMENT IS ENCLOSED. ☐

EMAIL _____

NOTIFY DEPT. OF FINANCE & ADMINISTRATION OF ANY CHANGE IN NAME AND ADDRESS SHOWN ABOVE

DUE DATES

BUSINESSES ON A CALENDAR YEAR - APRIL 15TH

BUSINESSES ON A FISCAL YEAR - 105 DAYS AFTER THE END OF THE FISCAL YEAR

PLEASE INDICATE YOUR FISCAL YEAR END IF NOT 12/31 IN THE SPACE PROVIDED _____

Enter you Federal & Kentucky taxpayer Identification Numbers on the appropriate line below. If you do not have these numbers, please enter your Social Security Number. Failure to properly list these identification numbers will result in a delay in the processing of your return.

FEDERAL EMPLOYER I.D. _____

KENTUCKY EMPLOYER I.D. _____

SOCIAL SECURITY NUMBER _____

If your accounting period is based on a calendar year, use the receipts information as of December 31 of the proceeding calendar year.
If your accounting period is based on a fiscal year other than a calendar year, use gross receipts as of the most recently completed fiscal year.

Section I

1. Total Gross Receipts for the Previous Year **2024** $_____
(Section II will total gross receipts of Line 1 above)

2. Multiply Line 1 by .0035 (Enter amount here) $_____
If the amount on Line 2 is greater than $75, this is the amount you pay.
If the amount on Line 2 is $75 or less, you pay the $75 minimum
If the amount on Line 2 is greater than $32,300, see Item 1 of the License Information Handout

3. Actual Amount Due (if paid by due date) $_____

4. Minimum Penalty is $25 or 5% of Line 3 per month or fraction thereof past the due date up to 25% whichever is greater $_____

5. Interest is 1% of Line 3 per month or fraction thereof $_____

6. Total Remittance $_____

EXTENSION REQUESTS ARE REQUIRED TO BE ACCOMPANIED BY AN ESTIMATED PAYMENT OR A MINIMUM OF $75

Section II

Please list the property addresses and gross receipts of all commerical rental properties in the City of Newport. The total of gross receipts below should be the same as reported in Section 1 , Line 1.

1) _____ $_____ 4) _____ $_____

2) _____ $_____ 5) _____ $_____

3) _____ $_____ 6) _____ $_____

QUESTIONS CAN BE SENT TO: OL@NEWPORTKY.GOV

rev. 3/25 cm