



# Warren County Occupational License



## EMPLOYER'S RETURN OF LICENSE FEE WITHHELD

If no wages were paid this period, mark "NONE" and return this form

- 1. Salaries, wages, commissions & other compensation paid all employees for services in this County \$ \_\_\_\_\_
- 2. Tax Due at - 1.00% \$ \_\_\_\_\_
- 3. Adjustment for preceding quarters (past due balances / underpayments) \$ \_\_\_\_\_
- 4. Penalty-monthly (no less than \$25 no more than 25%) 5.00% \$ \_\_\_\_\_
- 5. Interest (per month) - 1.00% \$ \_\_\_\_\_
- 6. BALANCE DUE \$ \_\_\_\_\_

7. Overpayment to be credited to next quarter \$ \_\_\_\_\_

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed \_\_\_\_\_

Official Title \_\_\_\_\_ Date \_\_\_\_\_

Account No. \_\_\_\_\_

Phone Number \_\_\_\_\_



Indicate any name or address change above.

FOR PERIOD ENDING

Month	Day	Year

RETURN DUE ON OR BEFORE

Month	Day	Year

FED ID No. \_\_\_\_\_

Make checks payable and mail to:

**Warren County Occupational License**

429 E. 10TH ST. STE 200

Bowling Green KY 42101

Phone: (270) 842-5805

Fax: (270) 842-2400

Sue.Bruce@ky.gov

Form OCC-3PT Rev. 9/27/02

\*PLEASE MAKE A COPY OF THIS FORM FOR YOUR RECORDS.