

Rental License Application

Due by: April 15th each year

City of Dayton

514 Sixth Ave, Dayton, Ky 41074

PH: (859) 491-1600

www.daytonky.com



ONLINE FORM

I. PROPERTY OWNER INFORMATION:

Type of Business:	<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship		
Name of Property Owner:		Property Owner Telephone:	
Property Owner Address:			
Email Address:		Employer ID# (SSN or EIN)	
Owner/Partner/Corporate President Name, Address, Phone#, DOB, and SSN:			
Business Start Date (in city):		Number of Employees:	
Contact Person for Taxes/Fees		Contact Telephone:	

II. RENTAL OCCUPATIONAL LICENSE FEE COMPUTATION

1. Multiply Gross Rents received by .01. If total is less than \$100.00, enter \$100.00 minimum fee:	\$ _____
2. Late Penalty at 5% per month (minimum \$25, maximum 25% or whichever is greater):	\$ _____
3. Interest at 1% per month thereof from the due date. (If applicable):	\$ _____
4. Total Rental Occupational Fee Due:	\$ _____

III. DAYTON RENTAL PROPERTY ADDRESS(ES) LISTINGS

LIST THE ADDRESS OF EACH INDIVIDUAL RENTAL PROPERTY OWNED OR OPERATED BY THE LICENSEE LOCATED WITHIN THE CITY OF DAYTON:

Property #1 – Address: _____ Property #2 – Address: _____

Property #3 – Address: _____ Property #4 – Address: _____

Property #5 – Address: _____ Property #6 – Address: _____

Property #7 – Address: _____ Property #8 – Address: _____

Property #9 – Address: _____ Property #10 – Address: _____

Property #11 – Address: _____ Property #12 – Address: _____

Property #13 – Address: _____ Property #14 – Address: _____

IV. SIGNATURE

***IMPORTANT* Attach Federal Return forms including but not limited to Form Schedule C or E.**

WARNING: Statements in this application shall be made under oath, or by affirmation or by any other legally authorized manner of attesting to the truth of such statement. Any false statements made herein shall be punishable according to law; and may be cause for denial of the application or the revocation of the business license issued pursuant thereto. I hereby certify, under penalty of perjury, that the statements made herein and in any supporting schedules are true, correct, complete and to the best of my knowledge. I, _____, the undersigned, hereby certify that I am authorized to sign this license application for the above business and persons, and that, I have made full inquiry into the information given above and to the best of my knowledge, the statements contained above are true and correct.

Signature of PREPARER: _____ Signature of LICENSEE: _____

Print Name: _____ Print Name: _____

Office Use only:

Received By: _____

Date: _____