



City of Pikeville  
 DIVISION OF TAX COLLECTION  
 606-437-5102  
 243 Main Street  
 Pikeville, Kentucky 41501

James A. Carter  
 Mayor

Rebecca Hamilton  
 Tax Administrator

**REGULATORY LICENSE FEE RETURN**

1. TOTAL RECEIPTS	\$ _____
2. SALES OF ITEMS NOT SUBJECT	_____
3. RECEIPTS FROM SALE OF ALCOHOLIC BEVERAGES (Subject to License Fee)	_____
4. REGULATORY LICENSE FEE: 3% of Line 3	_____
5. LESS CREDIT ALLOWED (See Instructions Below)	_____
6. LICENSE FEE DUE	_____
7. PENALTY FOR LATE PAYMENT	_____
8. INTEREST FOR LATE PAYMENT	_____
9. TOTAL (Line 6 plus Line 7 plus Line 8)	\$ _____

I DECLARE UNDER THE PENALTIES OF PERJURY THAT THIS RETURN AS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT, AND COMPLETE RETURN.

_____ SIGNATURE	_____ TITLE	_____ DATE
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**ALL RETURNS RECEIVED WITHOUT PROPER SIGNATURES WILL BE ASSESSED A \$20.00 SERVICE CHARGE.**

INSTRUCTIONS FOR REGULATORY LICENSE FEE RETURN

1. A CREDIT OF ¼ OF THE INITIAL LICENSE FEE SHALL BE DEDUCTED EACH QUARTER FROM THE REGULATORY LICENSE FEE TO DETERMINE THE LICENSE FEE DUE.
2. PENALTY FOR FAILURE TO FILE A RETURN AND PAY QUARTERLY REMITTANCE BY THE DUE DATE IS 20% OF THE TAX FOR EACH THIRTY DAYS OR FRACTION THEREOF. THE TOTAL LATE FILING PENALTY SHALL NOT EXCEED 25% OF THE TAX PROVIDED.
3. INTEREST AT THE RATE OF 20% PER ANNUM WILL APPLY TO ANY LATE PAYMENTS.

**MAKE CHECK PAYABLE TO: CITY OF PIKEVILLE TAX DIVISION**

**MAIL TO: CITY OF PIKEVILLE, DIVISION OF TAX COLLECTION  
 243 MAIN STREET, PIKEVILLE, KY 41501-3882**

CUSTOMER NAME AND ADDRESS:

CITY LICENSE NUMBER \_\_\_\_\_  
 FOR QUARTER ENDING \_\_\_\_\_  
**DUE ON OR BEFORE** \_\_\_\_\_