

City of Shepherdsville Alcohol, Food & Beverage License Application

Please remit this form and payment to:
City of Shepherdsville
Attn: Business License Dept.
634 Conestoga Pkwy.
Shepherdsville, KY 40165

Business Name:		
DBA:	FEIN# or SS# _	
Business Physical Address:	City:	Zip:
Mailing Address:	City:	Zip:
Business Description:	Business Phone # ()	
Contact Person:	Phone #: ()	Email:
Malt Beverage (Beer/Wine): \$200 Sunday Sales: \$300	Liquor by the Drink: \$500	Packaged Liquor: \$400
Distributing/Servicing/Operating Coin/amusement machines: \$10 per machine: YesNo How many?		
You must have a separate license for each of the following listed above, along with a Business License. Before the City of Shepherdsville can issue a license, we MUST have a copy of your KY State License in hand with this application.		
If food will be served at your business, Ordinance 001-520 requires each business selling food and/or beverages to collect an additional 2% tax of its gross sales and remit to the Shepherdsville/ Bullitt Convention Centre monthly. The Owner/Operator of the business shall remit payment with the correct form to Paroquet Springs Conference Centre, 395 Paroquet Springs Dr., Shepherdsville, KY 40165. Should you have any questions, please contact Paroquet Springs Conference Centre at 502-543-8687. By signing this, I acknowledge that I have read and understand the information above.		
Signature	 Date	
Office Use Only:	Down T	Clarity
Account Number: Amo	ount Paid: Payment Type	e: Clerk: