



CITY OF CAMPBELLSBURG

PO Box 67
Campbellsburg, KY 40011
Phone: (502) 532-6050
Fax: (502) 212-2012

APPLICATION FOR 2026 BUSINESS LICENSE

PLEASE PRINT OR TYPE THE INFORMATION BELOW (incomplete forms will be returned)

Name of Business _____

Street Address _____

City/State/Zip _____

Mailing Address (if different from above) _____

Phone/Cell Phone _____

Type of Business/Profession _____

NAME & TITLE (Print) _____ SS or Federal ID # _____

EMAIL ADDRESS _____ NUMBER OF EMPLOYEES _____

CALCULATE THE AMOUNT YOU OWE BELOW

\$100.00 for employers with fewer than 10 employees-Agents _____

\$125.00 for employers with 10-19 employees-Agents _____

\$150.00 for employers with 20-39 employees-Agents _____

\$250.00 for employers with 40 or more employees-Agents _____

\$25.00 for seasonal business (lawn care, landscaping, farmer's market etc.) _____

\$20.00 per day for limited time _____

TOTAL AMOUNT DUE \$ _____

Be advised that if your business is Operating/Conducting business in The City of Campbellsburg without the proper license, You will be responsible for obtaining A business license, and paying all applicable late fees, penalties, interest, legal costs and attorney fees.

SIGNATURE: _____ DATE: _____

Make checks payable to the *City Of Campbellsburg*. Mail Check and this form to the following:

CITY OF CAMPBELLSBURG
PO BOX 67
CAMPBELLSBURG, KY 40011.

If paying by Credit/Debit Card please complete the following:

Card Number

Exp. Date

3 digit Security Code on back

Cardholder Signature

****Note there is a 3.5% processing fee applied by the card processor.**

RENEWALS ARE DUE BY DECEMBER 31ST, 2025. THE 2026 BUSINESS LICENSE YEAR BEGINS JANUARY 1ST, 2026 AND RUNS THROUGH DECEMBER 31ST, 2026.

PLEASE RETAIN A COPY OF THIS APPLICATION FOR YOUR RECORDS