DO NOT
STAPLE
FORMS

LOUISVILLE METRO REVENUE COMMISSION

FORM:

EXTENSION REQUEST

☐ **CHECK IF CHANGE IN ADDRESS IS BELOW**

Name

Address

City State Zip

Phone Ext

ACCOUNT NO

TAX YEAR ENDING

Each individual taxpayer or business entity registered with this agency for the purpose of reporting local occupational taxes must apply separately to this agency for an extension of time within which to file their local tax return. This application must be submitted by the **15th** day of the **fourth** month following the close of the tax year and allows a six (6) month extension of time in which to file the return.

Individual Social Security Number

Federal ID Number, if applicable

Estimated payment

A 90% estimated payment of the final tax liability is required to avoid penalty.

INTEREST - Full payment of tax due must be paid by the original due date of the return to avoid interest charges of 12% annually. Interest is assessed from the regular due date of the return until the tax due is fully paid.

PENALTIES - Unless estimated payments equal to at least 90% of the final tax liability are made by the regular due date of the return, a late payment penalty of 1% per month (to a maximum of 5% cumulative) of the unpaid amount as finally determined will be assessed. **Pursuant to KRS 67.790, there is a minimum $25.00 penalty for failure to file and/or pay any return or report by the due date.**

NOTICE - CORPORATIONS AND PARTNERSHIPS: If this extension request is for a tax period of less than twelve (12) months, please indicate the reason below

☐ Tax year end changed to:

☐ Final return -- Business ceased:

☐ Corporate Merger -- Short year return due to merger on with:

Name and address:

Federal ID:

After this short year return, our tax year will end on

☐ Corporate Acquisition -- Short year return due to the acquisition on by:

Name and address:

Federal ID:

After this short year return, our tax year will end on

☐ Other: (Please explain.)

Signature of Preparer

Print Name **Phone Number**

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