## **University of Kentucky** OCCUPATIONAL LICENSE FEE (LOCAL CITY TAX) FORM

**Purpose:** This form should be used when any portion of an employee's geographical work location is outside of the Lexington/Fayette county, Kentucky area.

**Duration:** This form is effective only for the current calendar year. A new form must be submitted by the department each year or as needed.

## **Employee Section:**

If your **WORK** assignment is not geographically located in Lexington, KY, you will be eligible for exemption from Lexington Occupational Tax. However, you will be required to pay the local tax for the city/county/state in which you physically work. You cannot claim exemption from local city taxes based on where you live. Exemption and/or

Reason	for	sub	mitti	ing	forr	n:

taxes are based on your work location not where	you live.			
Reason for submitting form:				
Work Station outside Lexington/Fayette Co	unty			
Travel for Work - Percent of time traveling	outside of main work location			
Provide details of reported travel time:				
Employee Name:	Person ID Number:			
Pernr Number:	Effective Date:			
Work Address: House number:	Street Address:			
City:	State: Zip:			
City/County Code and Name City/County Code and Name	be completed in order for form to be accepted and processed.  Percent taxable  Percent taxable			
City/County Code and Name	Percent taxable			
City/County Code and Name	Percent taxable			
City/County Code and Name	Percent taxable			
<b>Employee Signature</b> I declare that to the best of my knowledge this is a true, correct Services of any change(s) in my status during the calendar year	t, and a complete document. Additionally, I realize it is my responsibility to notify Payroll r.			
Business Officer	Phone Number			