

CITY OF HAMBURG OCCUPATION TAX

Business Name

Owner

Address

Mailing Address

Phone Number

Date Opened

Date Closed

Type of Business

Previously owned by & name of business if different

Must File An Inventory Schedule Yes No

Rate Per Year If Applicable \$

Date Paid	Receipt #	Permit #	Occupation Tax Amount Due	Penalty	Total Amount Paid	Year	Date Billed	Inventory Amount