

THE CITY OF PADUCAH FINANCE DEPARTMENT PO BOX 3001241 LOUISVILLE, KY 40290-1241 Phone (270) 444-8595 revenue@paducahky.gov

Annual/Quarterly Franchise Fee Form for Telecommunications Franchise Agreement Holders

1.	Name of Business:
2.	Contact Information:
	Name & Title
	Address
	Phone Number Email
3.	Provide the following prerequisite information: a. Business License Number b. Date of Executed Franchise Agreement with the City of Paducah
wr cal rep sul	rsuant to Ordinance 2024-02-8805, please select the amount that is greater and provide a itten report containing an accurate statement in summarized form and detail of its culation of the amount of the payment, verified by an officer or other authorized presentative of Grantee, setting forth its Gross Revenues according to their accounting bodivisions, and any deductions claimed for the period upon which the payment is imputed.
of co	yment not received by the City by the due date shall be assessed interest equal to the lesson (i) one percent (1%) per month, or (ii) the highest rate permitted by law. Interest shall be mpounded annually. Interest shall be due on the entire late payment from the date on the payment was due until the date on which the City receives payment.
	 Minimum Annual Franchise Fee \$6,000 in the first year and increasing by \$1,000 annually. Grantee's first Minimum Annual Franchise Fee payment, if applicable, shall be paid in lump sum forty-five (45) days after execution of the Franchise Agreement. All subsequent Minimum Annual Franchise Fee payments if applicable, shall be paid in lump sum on or before April 15th of each calendar

year during the term of the franchise.

For Office Use Only - Account Number: 1000 411500