

ľ	۷o				
Α	pplic	catio	n fo	r	an
Oc	cupa	ition	Lic	en	se

Business Name / Trade Name of Applicant	/ DBA		Number of Employees			
Business Address						
	City		State	Zip Code		
Business Telephone	Business E-mail					
Nature of Business (Wholesale, Retail or Service)	Business Type (e.g. drug store, restaurant, grocery)					
Missouri Retail Sales Tax Id. No.						
Applicant/Owner's Name	Date of Birth					
Applicants Address						
Applicant's Driver's License #		City	State	Zip Code or Attach W-9*		
City of S	Smithville, 107 W	Applic documents with appropri . Main St., Smithville, MO il Development@Smithvil	64089			
Required Documentation:						
Retail Sales License (Attached) State No Tax Due Statement dated w/in 90 days (Attached) Occupancy Certificate (zoning compliance) Workmen's Compensation (Attached) Completed W-9 (or copy of Driver's License) Food Service Inspection Report (Attached)		Aft Li	LICENSE FEE: Application Date: December 1 – February 28: \$75.00 March 1 – May 31: \$50.00 After June 1 – November 30: \$25.00 Licenses Expire on November 30 th . Renewal price based upon gross receipts.			
All Contractors must also provide: Master's Licenses for Electrical Mechanical Plumbing		Application is no documentation	ot complete without a attached. The applica tion is complete and a	II required int does hereby certi		
Contractors who work in Right of Way: General Liability Insurance (\$2.5 mil Min. Coverage)		Applicant's Sig	nature			