

## **Business License Renewal**

220 SE Green Street Lee's Summit, MO 64063 Phone 816.969.1220 / Fax 816.969.1221 / <u>www.cityofls.net</u>

NEW HOPE COUNSELING LLC JUDY GARDNER 656 SE BAYBERRY LN, Unit 105 LEES SUMMIT, MO 64063

## PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Please Update your Information. If there are changes to the information provided, please draw a line through and correct.

Physical Business Address: 656 SE BAYBERRY LN 105 LEES SUMMIT, MO 64063 Legal Name of Business: (if different than DBA): JUDY GARDNER COUNSELING LLC Type of Organization: Service Business Classification: 800 Counseling/Elderly/Students

E-Mail Address: GARDNERCOUNSELING@GMAIL.COM

| Business Phone Numb  | pers:   |   |  |                        |
|--|---|---|--|------------------------|
|  |   | (MAIN)  | (CELL)                                     | (FAX)                  |
| Contact Name<br>Address<br>City - State<br>Phone Number          |   | (2nd  | ۲) (۱) ـــــــــــــــــــــــــــــــــــ |                        |
| Emergency Contacts:  | (1st)   | (2nd)   | (3rd)                                      |                        |
| Phone number   | (1st)   | (2nd)   | (3rd)                                      |                        |
| Has your Physical Add  | dress changed c<br>n a Lee's Summ<br>sion alarm? <b>Y o</b> | ohysically located in Lee's Summ<br>over the last year? Y or N (If y<br>it Commercial area or Residenti<br>r N (circle) | es complete Zoning Approva                 |                        |
| Employee Headcount<br>Full Time: 1<br>Part Time: 1<br>Temporary: | for this locatio  | n:  |  |                        |
| IF DOING ANY RETAIL  | SALES (provide co   | py of current no sales tax due le   | tter) -                                    |                        |
| IF PHYSICAL ADDRESS<br>website at www.cityof                     | le not  | VITHIN LEE'S SUMMIT, PLEASE S   |  | oning forms located on |

(Continued on back page)

| Please pro | ovide a general | description or sc | ope of work for | your business: |
|------------|-----------------|-------------------|-----------------|----------------|
|------------|-----------------|-------------------|-----------------|----------------|

| -   |                        |                                      |                     |
|---|------------------------|--------------------------------------|---------------------|
|   |                        |                                      |                     |
| -   |                        |                                      |                     |
|   |                        |                                      |                     |
| FEE CALCULATION (please check those that apply):  |                        |                                      |                     |
| \$50 Business License Fee (base fe  | ≥e)                    |                                      |                     |
| Penalty for delinquent license is 59  | 6 per month not to e   | xceed 25% (is delinquent 60 days a   | fter expiration)    |
| Total fee   |                        |                                      |                     |
| I declare under penalty of perjury that to the best of m  | vy knowledge and be    | elief the statements made herein a   | e true and correct. |
| X<br>Signature of Owner(s) or Corporation Agent/Owner   | X                      |                                      | //                  |
| Signature of Owner(s) or Corporation Agent/Owner  | Title                  |                                      | Date                |
| The filing of this application or the granting of a busine<br>the provisions of the zoning code, and is further subjec<br>specific occupations and businesses. Payment by Check | t to all applicable fe | deral, state and local laws and regu | 5                   |
|   |                        |                                      |                     |

 FOR OFFICE USE ONLY

 License Effective from \_\_\_\_/ \_\_\_\_ to \_\_\_\_/ \_\_\_\_ Fee Remitte \_\_\_\_\_\_

 License # \_\_\_\_\_\_



Dear Business Owner:

Enclosed you will find the **Business License Renewal Form** for the license year July 01, 2017 through June 30, 2018. Please take a moment to review the information, particularly verifying the accuracy of the **Missouri Sales Tax ID** number and business address noting any corrections or additions.

Missouri Senate Bill 30 became effective January 1, 2009; requiring a statement of "No-Tax Due" from the Missouri Department of Revenue before the issuance of a business license by the City for any business engaging in retail sales. A business owner can enter their Missouri Tax Identification Number and PIN at <a href="http://dor.mo.gov/business/sales/notaxdue/">http://dor.mo.gov/business/sales/notaxdue/</a> to print their statement and include with the business license renewal. Business license renewals that are submitted without a no tax due certificate cannot be processed.

## **BUSINESS LICENSE FEES INFORMATION**

As governed by City Ordinance #28-30, the base license fee is \$50.00. Businesses are required to have a separate license for each location.

All renewals not received by August 30, 2017 will be considered delinquent and subject to penalty. Penalty is 5% per month not to exceed 25%. Please make checks payable to "City of Lee's Summit".

If you will <u>not</u> be doing business in Lee's Summit during the next Business License year and you are not located in Lee's Summit, <u>please send notification</u>. If you should have questions regarding your renewal, please contact the Development Center at 816-969-1220.

Thank you for your prompt attention.

