Expiration date: 09/30/2017



Business License Renewal

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

F.I.T. MUSCLE & JOINT CLINIC MATTHEW LANE 22346 W 66TH ST SHAWNEE, KS 66226

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: 1634 SE BLUE PKWY LEES SUMMIT, MO 64063
Legal Name of Business: (if different than DBA): FIT MUSCLE & JOINT CLINIC
Type of Organization: Health
Business Classification: 300 Hospitals/Clinics/Dr Office

E-Mail Address: DRLANE@FITMJC.COM

Business Phone Numbers:

(MAIN)

(CELL)

(FAX)

Contact Name
Address
City - State
Phone Number

Emergency Contacts: (1st) _______ (2nd) _______ (3rd) _________

For businesses physically located in Lee's Summit this section MUST be completed

(1st) _____ (2nd) _____ (3rd) _____

Has your Physical Address changed over the last year? Y or N (If yes complete Zoning Approval Form) Is business located in a Lee's Summit Commercial area or Residential? (circle)

Do you have an intrusion alarm? Y or N (circle)

Total Building Square Footage - 1300

Employee Headcount for this location:

Full Time: 1 Part Time: Temporary:

Phone number

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) -

IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S SUMMIT, PLEASE SUBMIT NEW ZONING FORM. Zoning forms located on website at www.cityofls.net

(Continued on back page)

Please provide a general description or scope of work for your business:		
_		
_		
FEE CALCULATION (please check those that apply):		
\$50 Business License Fee (base fee	e)	
Penalty for delinquent license is 5% Total fee	per month not to exceed 25% (is delinquent 60 days after	er expiration)
I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are true and correct.		
X	X	/ /
Signature of Owner(s) or Corporation Agent/Owner	XTitle	Date
	to all applicable federal, state and local laws and regular make check payable to City of Lee's Summit.	
FOR OFFICE USE ONLY License Effective from/ to License #	//Fee Remitte	



Dear Business Owner:

Enclosed you will find the **Business License Renewal Form** for the license year October 01, 2017 through September 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 http://dor.mo.gov/business/sales/notaxdue/ 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 November 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.