

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

MASSAGE HEIGHTS/RACHEL MCKENZIE
 Licensing
 128 NW 191 RD
 WARRENSBURG, MO 64093

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: 970 NW BLUE PKWY D LEES SUMMIT, MO 64086
 Business E-Mail Address:: MRSMCKENZIE_08@YAHOO.COM
 Legal Name of Business: (if different than DBA):
 Type of Organization: Massage Therapist
 Business Classification: 1200 Massage Therapist

Renew on-line communications email address: _____

(If you would like to renew on-line, you must provide an email above. This email address could be different than the Business Email Address. This email address is the person that is responsible for Business Licenses/Renewals at your place of business- Further Instructions included)

Business Phone Numbers :

| Primary | Cell | Fax |
|------------|------|-----|
| 8165543438 | | |

Contact Information :

| Primary | Secondary | Emergency |
|--|-----------|-----------|
| RACHEL MCKENZIE, Address:128 NW 191 RD, Phone:(816) 554-3438 | | |

(Continued on back page)

Please provide a general description or scope of work for your business:

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

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

| |
|---|
| <p>Has your Physical Address changed over the last year? Y or N (If yes complete Zoning Approval Form)</p> <p>Is business located in a Lee’s Summit Commercial area or Residential? (circle)</p> <p>Do you have an intrusion alarm? Y or N (circle)</p> <p>Total Building Square Footage -</p> <p>Employee Headcount for this location: Full Time: Part Time: Temporary:</p> <p>IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) -</p> <p>IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE’S SUMMIT, PLEASE SUBMIT A NEW ZONING FORM. Zoning forms located on website at www.cityofls.net.</p> |
|---|

FEE CALCULATION (please check those that apply):

\$50 Business License Fee (base fee)

Penalty for delinquent license is 5% per month not to exceed 25% (is delinquent 60 days after expiration)

Total fee

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 Title Date

The filing of this application or the granting of a business license neither confirms nor approves the use of land as regulated under the provisions of the zoning code, and is further subject to all applicable federal, state and local laws and regulations which apply to specific occupations and businesses. Payment by Check – make check payable to City of Lee’s Summit.

FOR OFFICE USE ONLY

License Effective from ____/____/____ to ____/____/____ Fee Remitted \$____ License # _____



LEE'S SUMMIT MISSOURI

Dear Massage Therapists and Massage Facilities of the City of Lee's Summit:

Enclosed you will find the **business license renewal application** for the license year August 01, 2020 through July 31, 2021.

As governed by City Ordinance #28-30, the base license fee \$50. **A Massage Facility license is \$50 per ordinance #28-63.** Businesses are required to have a separate license for each location and for each massage therapist. Under the provisions of the ordinance, it is unlawful for any person to engage in any business in the City of Lee's Summit without first securing a business license.

Please submit:

- Massage Therapist or Facility Business License Renewal Application as applicable
- Zoning Approval for new Facilities or in the case of an address change.
- Copy of the current certificate / license issued by Missouri Department of Economic Development, Division of Professional Registration, Missouri Board of Therapeutic Massage.
- Two (2) passport photographs of the massage therapist
- Appropriate fees (\$50 massage therapist; \$50 massage facility)

Facilities: Please note that you are responsible for any act or conduct in violation of the ordinance of any massage therapist on the massage facility premises and that all therapists hold a current license.

All renewals not received by September 30, 2020 will be considered delinquent and subject to penalty. If you will not be doing business in Lee's Summit during the license year, please **send notification.**

If you should have questions regarding your renewal form, please call the Development Services Department at (816) 969-1220.

Thank you for your prompt attention.

New! You can now renew your Business License online.

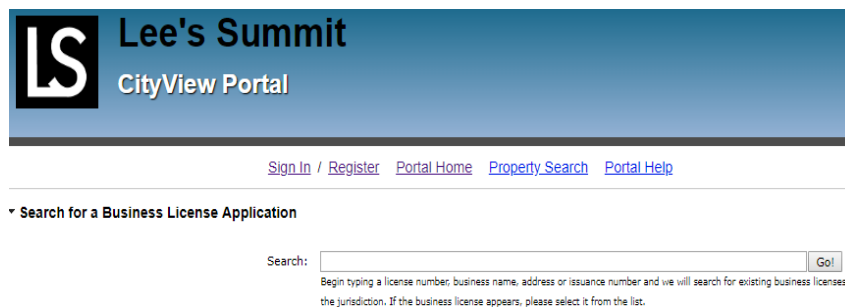
STEP ONE - Review the information provided in your renewal about your business. Mark through any item that is not correct and provide the correct information. ****NOTE – in order to renew on-line, you must provide an email address in the Renew on-line communications Email address field on the application in order for our offices to communicate with you about the status of your renewal. This email address could be different than the Business Email address, primary contact or Business Owner. This email address is the person that is responsible for Business Licenses/Renewals at your place of business.***

You will then need to scan your application in and save somewhere that you can access it later to upload through our renewal system.

STEP TWO- Visit <https://devservices.cityofls.net> and click on Status and Fees under Business Licensing



Begin Typing your Licensee Number (found on your certificate) OR your Business Name



****IMPORTANT*** – Carefully review your license information to make certain it is YOUR license that you are about to renew. **Many Businesses have similar names, Licensee #s, etc.**



License Application Status

Individual sections by clicking the header of the section you wish to collapse/expand.

Application Number: LC900180153

Business Name: This is a TEST

License Type: Food

Application Status: Inactive

Description of Business:

Mailing Address: 1341 SW SURREY TRCE

LEES SUMMIT MO 64081

United States

Locations: Property

[6291006220000000](#)

Address

[1341 SW SURREY TRCE, LEES SUMMIT, MO 64081](#)

Primary Contact: Desiree Hourigan, Address:1341 SURREY TRCE

Once you have reviewed and verified your license information, then scroll to the bottom of the page to browse for your scanned in application and supporting documentation. Hitting browse multiple times if you have multiple documents to find in different locations.

Select any additional documents you wish to provide:

Browse...

Provide a short description of this set of documents:

Once you have selected your Business License Application and any supporting documentation , click on the Upload Document button.

Select any additional documents you wish to provide:

Browse...

Business License Application.docx
Missouri No Sales Tax Due.docx

Remove
Remove

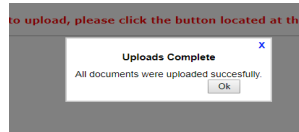
Provide a short description of this set of documents:

[Portal Home](#)

Upload Document

***Note – you must upload your signed application AND any supporting documentation for the renewal process to begin. (even if there are no changes to your information)**

You will receive a message that the uploads were complete



This will notify the Development services office of your renewal. They will review the application and supporting documentation and send an email notifying you of your complete or incomplete submittal. If your submittal is complete, the email will refer you back to the web portal to pay your fees and print your certificate. If your submittal is incomplete, the email will notify you of the incomplete items needed and refer you back to the website to upload the missing items.