



Expiration date 06/30/2020

Business License Renewal

220 SE Green Street
Lee's Summit, MO 64063
Phone 816 969 1220 / Fax 816 969 1221 / www.cityofls.net

RABO AGRIFINANCE INC
Licensing
14767 NORTH OUTER 40 RD STE 400
CHESTERFIELD, MO 63017

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 5008 NE LAKEWOOD WAY LEES SUMMIT, MO 64064
Business E-Mail Address ~~XXXXXXXXXX~~ colleen.wilhelms@raboag.com
Legal Name of Business (if different than DBA)
Type of Organization Service
Business Classification 800 Insurance Agent
800 Bank/S&L/Credit Union/Building and Loan

Renew on-line communications email address: colleen.wilhelms@raboag.com

(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 |
|------------|------|------------|
| 3143178000 | | 8776559511 |

Contact Information

| Primary | Secondary | Emergency |
|--|---|------------|
| COLLEEN WILHELMS, Address XXXX XXXX XXXX XXXX XXXX XXXX Phone (314) 317-8090 14767 N. Outer 40 Road Suite 400 Chesterfield MO 63017 | RAY KEITH, Address XXXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX Phone (314) 317-8316 14767 N. Outer 40 Road Suite 400 Chesterfield MO 63017 | DOUG MEYER |

(Continued on back page)

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

Ag Services

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

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 -

Employee Headcount for this location

Full Time 4

Part Time

Temporary

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 A NEW ZONING FORM Zoning forms located on website at www.cityofls.net.

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 Colleen Wilhelm X Manager-Corp Services 06/02/2020
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 #