



Business License Renewal

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

RE/MAX ELITE REALTORS Licensing 4243 NE LAKEWOOD WAY LEES SUMMIT, MO 64064

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:

4243 NE LAKEWOOD WAY LEES SUMMIT, MO 64064

Business E-Mail Address:: TDAVIDROGERS@REMAX.NET

Legal Name of Business: (if different than DBA):

SYLVAERNA PROPERTIES INC

Type of Organization:

Service

Business Classification:

800 Broker - Real Estate/Investor/Agent/Auto/Food

Renew on-line communications email address: marycarmean@remax.net

(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
8163738400	8168208595	8164784839

Contact Information:

Primary	Secondary	Emergency
T DAVID ROGERS, Address:1579 NE RICE RD, Phone:(816) 373-8400 4243 NE Lakewood Way Lee's Summit, MO 64064 Cell: 816.820.8595	MARY CARMEAN, Phone:(816) 373-8400 Cell: 816.591.9301 DAVID NICHOLS 1305 NE Horizon Drive Lee's Summit, MO 64086 Cell: 816.536.1334	#1 T DAVID ROGERS, Address:1579 NE- RICE RD, Phone:(816) 373-8400 816.820.8595 #2 David Nichols 816.536.1334 #3 Mary Carmean 816.591.9301

(Continued on back page)

Please provide a general description or scope of	work for your business:	
Residential real estate brokerage		
F DOING ANY RETAIL SALES (provide copy of curr	rent no sales tax due letter) -	
For businesses physically located in Lee's Sumr	mit this section <u>MUST</u> be completed	
Has your Physical Address changed over the last	year? Y or (If yes complete Zoning Ap	proval Form)
Is business located in a Lee's Summit Commerci a	al area or Residential? (circle)	
Do you have an intrusion alarm? Yon(N)(circle) Total Building Square Footage - 4700		
Employee Headcount for this location:		
Full Time: 36 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 I	FORM. Zoning forms located on
website at www.cityofls.net.		
FEE CALCULATION (please check those that apply):		
X \$50 Business License Fee (base fee)	
Penalty for delinguent license is 5%	per month not to exceed 25% (is delinquent	t 60 days after expiration)
\$50.00 Total fee		
		I I - Conservation and assessed
I declare under penalty of perjury that to the best of m	ny knowledge and belief the statements ma	de nerein are true and correct.
x Mary Carmean	x Office Administrator	06_/_09/_2020
Signature of Owner(s) or Corporation Agent/Owner	Title	Date
The filing of this application or the granting of a busing the provisions of the zoning code, and is further subject specific occupations and businesses. Payment by Chec.	ct to all applicable federal, state and local la	ws and regulations which apply to
FOR OFFICE LIFE ONLY		
FOR OFFICE USE ONLY License Effective from / / to	Fee Remitted \$	License #
Elective from		