



new  
8720 to 73121

### Business License Application

220 SE Green Street  
Lee's Summit, MO 64063  
Phone 816.969.1220 / Fax 816.969.1221 / [www.cityofls.net](http://www.cityofls.net)

PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

RECEIVED  
AUG 3 3 2020  
City of Lee's Summit  
Development Center

Date 07/08/2020  
MM DD YY

New Business (Y/N) \_\_\_\_\_

In business since 1989

Citizens Bank & Trust

Common/Preferred Name of Business (DBA) \_\_\_\_\_

Legal Name of Business (if different than DBA) \_\_\_\_\_

#### Physical Business Address:

Address 1150 NE Douglas City Lee's Summit State MO Zip 64086  
( ) 816-251-9000 ( ) 816-251-9090  
Business Address Phone # Cell # Fax # Email \_\_\_\_\_

#### Mailing Address: (if different from Physical Address)

Contact Name for Mailing Address: \_\_\_\_\_ ☐ DBA ☐ Legal Name ☐ Other \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Mailing Address Phone # Cell # Fax # Email \_\_\_\_\_

#### Contacts:

■ Primary Contact: Pamela J. Mosser Title (Owner/Corp. Agent/Applicant) Branch Manager  
506 NE 2nd St City Blue Springs State MO Zip 64014  
Address work Phone # (916) 251-9010 Cell # (307) 630-5795 Fax # \_\_\_\_\_ Email pmosser@cbtmail.com  
Date of Birth 10/22/58 Driver's License # 112A292003 State Issued MO

■ Secondary Contact: Rick Viar Title (Owner/Corp. Agent/Applicant) EVP  
(916) 251-9004 (916) 213-2505 ( ) \_\_\_\_\_  
Phone # Cell # Fax # Email rviar@cbtmail.com

Type of Organization (check one): ☐ Individual ☐ Partnership ☒ Corporation ☐ LLC ☐ Other \_\_\_\_\_

#### Please complete this section if your business is physically located in Lee's Summit.

Check if applicable: This is a change in ☒ business name ☒ business ownership ☒ physical business address  
Is business located in a Lee's Summit commercial area N/Y (If Y please complete a Commercial Zoning Approval form)  
Is business located in a Lee's Summit residence? Y/Y (If Y please complete a Home Occupation Zoning Approval form)  
Do you have an Intrusion alarm? N/Y (If Y please complete an Alarm User Registration application)  
Total Building Square Footage 3,755 Missouri State Sales Tax Number 11213108  
All applicants who make retail sales must submit a Missouri Department of Revenue Statement of No Tax Due with a date of issuance not more than 90 days before date of business license application/renewal. MDR can be reached at 573.751.9268.  
Employee Headcount for this location: 11 Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_

Please provide a general description or scope of work for your business (i.e. electrical contractor, doctor, retail store, etc.):  
Privately held financial institution: Retail Banking, Commercial Banking, and Wealth Management

(continued on next page)

1. Select Business License Category or NAICS code that best describes your business (choose one that applies)

Category	NAICS Code	Category	NAICS Code
Animal Services	81	Massage Therapy Establishment	81
Automobile Body/Repair Shop/Car Wash	81	Motel/Hotel Indicate # of rooms	72
Automobile Sales	81	Nursery, Greenhouse	44-45
Ball Bonds person	81	Pay Day/Title Loan	52
<input checked="" type="checkbox"/> Bank, Credit Union, Finance Company	52	Precious Metal Dealer/Pawnbroker	81
Contractor - Class A, B, C, or D	23	Real Estate Rental and Leasing	53
Contractor - Other	23	Recreation Business - Indoor/Outdoor	71
Day Care Provider - General (7-12)	81	Rental and Leasing	53
Day Care Provider - Limited (1-6)	81	Restaurant and Food Service	72
Drinking Establishment	72	Retail	44-45
Funeral Home	81	School, for profit	61
Gas Service Station & Convenience Store	81	Service Provider	81
Grocers	44-45	Service Provider with Retail Sales	44-45 or 81
Hospital, Nursing Home, Retirement Home, Health	62	Special Event	71
Insurance	52	Telephone Call Center	81
IT Services	54	Tow Service Provider	81
Landscaping-Mowing-Tree Trimmer	81	Transportation - Bus/Taxi/Limo/Rental Car	48-49
Liquor Store	44-45	Vending Machine	81
Manufacturing	31-33	Waste Management and Recycling Services	56
Massage Therapist (may/may not own business)	81	Wholesale Sales	42

2. The City may convert to e-billing in the future for some business types. Will you opt-in to the e-billing program?

☒ Yes - Business/Billing Email Address: Lbailey@ebtmail.com ☐ No Accounts Payable @ cbtmail.com

3. Lee's Summit locations: Who would be able to provide access to your building for City Emergency personnel?

Print names in order of preference to call first:

a. Name Pamela J. Mosser Tel # (308) 630-5795 Alternate Tel # (816) 714-6664  
b. Name Rob Binnay Tel # (816) 289-1929 Alternate Tel # ( )  
c. Name Rick Vitar Tel # (816) 213-9505 Alternate Tel # ( )

#### CONTRACTOR LICENSING INFORMATION

\*\*\*Contractors - please complete this section\*\*\*

Please select type of contractor license requested - \$25.00 annual contractor license fee for each Class

- ☐ Class A - General Contractor: construct, remodel, demolish, repair any structure
- ☐ Class B - Building Contractor: construct, remodel, demolish, repair all structures not exceeding 3 stories in height
- ☐ Class C - Residential Contractor: construct, remodel, demolish, repair any single family, duplex or townhouse structure
- ☐ Class D - Mechanical Contractor: perform mechanical (HVAC) services
- ☐ Class D - Electrical Contractor: perform electrical services
- ☐ Class D - Plumbing Contractor: perform plumbing services
- ☐ Please provide name of licensed representative (master) to be licensed \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Email \_\_\_\_\_ Cell # ( ) \_\_\_\_\_

- ☐ If renewal - provide 8 hours of CEU (please provide documentation of completion) or include optional in lieu of CEU fee of \$100.00 per license classification

FEE CALCULATION (please check those that apply):

- ☐ \$50 Business License Fee
- ☐ \$25 Contractor License Fee (\$25 for each license classification ie: Mechanical & Plumbing = \$50)
- ☐ \$100 Contractor fee in lieu of completion of 8 hours of annual continuing education (CEU) for each license classification

Penalty for delinquent license is 5% per month not to exceed 25%

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.

Pamela J. Mosser  
Signature of Owner(s) or Corporation Agent/Owner

Branch Manager  
Title

8.15.2020  
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 # \_\_\_\_\_



**ZONING APPROVAL  
FOR ALL BUSINESSES  
EXCEPT HOME OCCUPATIONS**

**DATE:** 07/08/2020  
**APPLICANT:** Pamela J. Mosser  
**BUSINESS NAME:** Citizens Bank & Trust  
**ADDRESS:** 1150 NE Douglas Street, Lee's Summit, MO 64086  
**TYPE OF BUSINESS:** Bank, Credit Union, Finance Company  
**TELEPHONE:** 816-251-9000 **ZONING DISTRICT:** CP-2  
(To be completed by the Planning Dept.)

X **NEW BUSINESS** X **CHANGE OF ADDRESS**  
X **CHANGE OF OWNERSHIP**

If applicable, what type of business previously occupied the space? (Include name of business if known)

Summit Bank of Kansas City - before that Arvest Bank

If locating in a previously occupied space, are there any building structural, mechanical, plumbing or electrical alterations or additions proposed? If so, please describe the nature of the alterations or additions.

No changes from Summit Bank of Kansas City

**AFTER THIS ZONING APPROVAL FORM HAS BEEN SIGNED, AN OCCUPANTIONAL/BUSINESS LICENSE APPLICATION AND FEE MAY BE ACCEPTED FOR FINAL PROCESSING IN THE FINANCE DEPARTMENT AT LEE'S SUMMIT, MISSOURI CITY HALL.**

**NOTE:** This form is required prior to acceptance of an application for an occupational/business license and issuance of a temporary permit to operate if the business location is within the limits of the City of Lee's Summit. New businesses with no physical location within the city do not require this form.

Pamela J. Mosser  
APPLICANT SIGNATURE

**APPROVED BY:**

[Signature]  
DEPT. OF PLANNING & DEV.

[Signature]  
CODES ADMINISTRATION

NA  
FIRE DEPARTMENT

- ☐ If checked, permits are required prior to performing any framing, mechanical, electrical or plumbing alterations or additions.