Please provide a general description or scope of work for your business:  Offer Sclf-Sewice mains laboral Services (laborany)
IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) -
*For businesses physically located in Lee's Summit this section <u>MUST</u> be completed*
Has your Physical Address changed over the last year? <b>(For N</b> ) (If yes complete Zoning Approval Form) Is business located in a Lee's Summit <b>Commercial area or residential?</b> (circle) Do you have an intrusion alarm? <b>Yor(s)</b> (circle) Total Building Square Footage -
Employee Headcount for this location: Full Time: 3 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 <a href="https://www.cityofls.net">www.cityofls.net</a> .
FEE CALCULATION (please check those that apply):
I declare under penalty of perjury that to the best of my knowledge and belief, the statements made herein are true and correct.  X
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 #