Expiration date: 10/31/2019



## **Business License Renewal**

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

ALLSTATE CONSULTANTS Licensing 900 SW OLDHAM PKWY, Unit 203 LEES SUMMIT, MO 64081

## 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

Physical Business Address:

410 SF 3rd St, Bldg. C. Suit 102, lu's Summit. MO 64063 900-5W OLDHAM PKWY 205 LEES SUMMIT, MO 64081

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

ALLSTATE CONSULTANTS LLC

Type of Organization:

Service

**Business Classification:** 

800 Marketing/Advertising/Consulting/Manuf Rep

E-Mail Address:

AJONES@ALLSTATECONSULTANTS.NET CCaldwell@allstateConsultants.net Ksayre@allstateConsultants.net

**Business Phone Numbers:** CELL: 573-476-9465 MAIN: 573-875-8799

	Primary	Seconday
Contact Names	Christina Calducell	Karen Sayre
Address	5304 NE Holiday Dr.	3312 LeMone Ind. Blvd.
City, State, Zip	Las Summit, MD, 64064	Columbia, 40 65201
Emergency Contacts (if different)		
Phone Number		

<sup>\*</sup>For businesses physically located in Lee's Summit this section MUST be completed\*

Has your Physical Address changed over the Last year Yor 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? Yor() (circle)

Total Building Square Footage - 1260

Employee Headcount for this location:

Full Time: 1 Part Time: p Temporary: 0

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.

(Continued on back page)

	Please provide a general description or scope of work for your business:
	Civil Engineering Consulting Form
	FEE CALCULATION (please check those that apply):
	\$50 Business License Fee (base fee) ZOZO + ZOZI - 100
.11	
15	*
	1 2 <b>2.</b> 50 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.
	NI .
	x Christian Caldwell x Office Manager 2/23/21 Signeture of Owner(s) or Corneration Agent/Owner Title
	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 #