

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

Sandwich Shop.

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20041560

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) N
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 - 1800

Employee Headcount for this location:
Full Time: 7
Part Time: 5
Temporary:

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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):

X \$50 Business License Fee (base fee)

Penalty for delinquent license is 5% per month not to exceed 25% (is delinquent 60 days after expiration)

\$150 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 Niruben A. Patel
Signature of Owner(s) or Corporation Agent/Owner

x Vice President.
Title

05/13/2021.
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 #____