Expiration date: 06/30/2021



Business License Renewal

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

SUMMIT CPA LLC Licensing 1308 NE WINDSOR DR #2E LEES SUMMIT, MO 64086

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:

1308 NE WINDSOR DR LEES SUMMIT, MO 64086

Business E-Mail Address:: 7877RUSS@SBCGLOBAL.NET Legal Name of Business: (if different than DBA):
Type of Organization:
Please provide your NAIC Code: 541211

Renew on-line communications email address: 1977 rwss 5 bc q lobal e Het (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)

**IMPORTANT! If you would like to RENEW your Business License online, please visit
https://devservices.cityofls.net/renew-business-license.html for instructions.

Business Phone Numbers:

Primary	Cell	Fax
8165255000	8165916591	8165374040

Contact Information:

Primary	Secondary	Emergency		
RUSSELL HONLEY, Address: 2309 SW 10TH ST, Phone: (816) 537-6964 Brue Springs MO	ROBIN GIBBONS, Phone:(816) 537-6964	RUSSELL HONLEY, Address: 2309 SW 10TH ST, Phone: (816) 537-6964 Brue Springs MC		

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Please provide a general description or s					
Tax and accou	pritu	SEKVICE	ಲ		
F DOING ANY RETAIL SALES (provide cop	y of current no	sales tax due l	etter) -		
Service-No re	rait 30	C165			
		Air- MICT	ha assanlatad*		
For businesses physically located in Lee					
Has your Physical Address changed over	the last year?	on (If yes co	mplete Zoning A	(pproval Form	ı
Is business located in a Lee's Summit C		or Residential? (d	circle)		
Do you have an intrusion alarm or N	(circle)				
Total Building Square Footage - 100 1	10				
Employee Headcount for this location:					
Full Time:					
Part Time: 1 Temporary:					
IF DOING ANY RETAIL SALES (provide copy			tor of	rall sa	162
IF DOING ANY RETAIL SALES (provide copy	of current no sale	es tax due letter)	- 110	, ,	
IF PHYSICAL ADDRESS HAS CHANGED WITH website at www.cityofls.net .					
FEE CALCULATION (please check those that	apply):				
X \$50 Business License Fee	(base fee)				
Penalty for delinquent lice	nas is EW mor m	onth not to evice	d 25% lis delinau	ent 60 days afte	er expiration)
Penalty for delinquent lice	ense is 5% per illi	until flot to excee	a 25% (is acimique		
Total fee					
I declare under penalty of perjury that to the	e best of my kno	wledge and belief	the statements r	nade herein are	true and correct.
)				06,12,200
X CESSED DATE		Marta	<u>-3en</u>		Date
Signature of Owner(s) or Corporation Agent	<i>~</i> ·				
The filing of this application or the granting the provisions of the zoning code, and is fur specific occupations and businesses. Payme	ther subject to al	'I applicable feder	al, state and local	laws and regul	as regulated under ations which apply to
FOR OFFICE USE ONLY		, .	- Domise-d &	liconco #	
License Effective from	to/_	/ re	e kemitted \$	_ 11001136#_	