



Business License Application

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

PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Date 06/16/21 New Business (Y/N) In business since
G & F Group, LLC. G & F Group, LLC.
Common/Preferred Name of Business (DBA) Legal Name of Business (if different than DBA)

Physical Business Address:

814 Main Street SW Gainesville GA 30501
Address City State Zip
(678)-696-8350 (706)-490-7301 jlong@gandfgroup.com
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: Jeremy Long Applicant
Name Title (Owner/Corp. Agent/Applicant)
814 Main Street SW Gainesville GA 30501
Address City State Zip
(706)-490-7301 ( ) jlong@gandfgroup.com
Phone # Cell # Fax # Email
Date of Birth 05/22/90 052644901 GA
MM DD YY Driver's License # State Issued

Secondary Contact: Robert Summers Agent
Name Title (Owner/Corp. Agent/Applicant)
( ) (912)-481-3082 rsummers@gandfgroup.com
Phone # Cell # Fax # Email

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? N/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 Missouri State Sales Tax Number
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: 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.):
Commercial metal stud framing and drywall contractor

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       |
| _____ Bail Bondsperson                                 | 81         | _____ Pay Day/Title Loan                        | 52          |
| _____ 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          |
| <input checked="" type="checkbox"/> 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: bmason@gandfgroup.com  No

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 \_\_\_\_\_ Tel # ( ) \_\_\_\_\_ Alternate Tel # ( ) \_\_\_\_\_  
 b. Name \_\_\_\_\_ Tel # ( ) \_\_\_\_\_ Alternate Tel # ( ) \_\_\_\_\_  
 c. Name \_\_\_\_\_ Tel # ( ) \_\_\_\_\_ 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%

\$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.

  
 Signature of Owner(s) of Corporation Agent/Owner

Project Manager  
 Title

6 / 16 / 21  
 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 # \_\_\_\_\_