



Expiration date: 07/31/2020

Business License Renewal

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

ADVANCED ORTHOPEDICS AND SPORTS MEDICINE *dba Sand Orthopedics*
Licensing
~~2000 SE BLUE PKWY, UNIT 230~~ *2861 NE Independence Ave St. 201*
~~LEES-SUMMIT, MO. 64063~~ *Lees Summit, MO 64064*

(moved Jan 2020)

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: ~~2000 SE BLUE PKWY 230 LEES SUMMIT, MO 64063~~
Business E-Mail Address:: MATTHEWDAGGETT@GMAIL.COM
Legal Name of Business: (if different than DBA):
Type of Organization: Health
Business Classification: 500 Medical/Dental

Renew on-line communications email address: *mcgalliard@sandorthopedics.com*
(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- Further Instructions included)

Business Phone Numbers :

Primary	Cell	Fax
8165252840	8166798849	8165252841

Contact Information :

Primary	Secondary	Emergency
MATT DAGGETT, Address: 2622 W 92ND ST, Phone: (816) 679-8849		

(Continued on back page)

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

medical practice

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

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)

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 -

Employee Headcount for this location:

Full Time: 36

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 www.cityofls.net.

*see attached
payment for
tax info
paid & updated
for 2020*

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)

_____ 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 [Signature]
Signature of Owner(s) or Corporation Agent/Owner

X President
Title

14 / 3 / 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 # _____



RECEIPT OF PAYMENT

Receipt Number:	2020047454
Receipt Date:	01/21/2020
Date Paid:	01/21/2020
Payment Method:	Check,
Check Number:	5312,
Full Amount:	\$12,360.00
Amount Tendered	\$12,360.00
Paid By:	EXCEL CONSTRUCTORS, Address:8041 W 47TH ST , Phone:(913) 261-1000

Fees:

Fee Description	Reference / Application Number	Amount Paid
7232302-Commercial License Tax Fee	PRCOM20192339	\$12,360.00

DEVELOPMENT SERVICES

LICENSE TAX BILL

Date: October 22, 2019

EXCEL CONSTRUCTORS
8041 W 47TH ST
OVERLAND PARK, KS 66203

Application No:	PRCOM20192339
Title of Project:	SANO ORTHOPEDICS
Project Address:	2861 NE INDEPENDENCE AVE, Unit:201, LEES SUMMIT, MO 64064
Legal Description:	I-470 BUSINESS & TECHNOLOGY CENTER LOT 15A---LOT 15A

License Tax: 720 Medical/Dental Office:
License Tax Fees: 7232302-Commercial License Tax Fee: \$

License Tax Credit:

Total License Tax Fees:	\$12,360.00
Total License Tax Credits:	<u>\$0.00</u>
Total Amount Due:	\$12,360.00

RIGHT TO APPEAL

If the license tax is paid by the building contractor without submitting a notice of appeal (written protest) at the time of tax payment including a valid, authorized signature on the tax receipt, the right to appeal is deemed forfeited by the building contractor.

NOTICE TO APPEAL

The appropriate box must be checked below as the basis of appeal in accordance with city ordinance. No other appeals will be accepted by the city. A letter detailing the basis of appeal must accompany the payment of the tax as well as any supporting documentation requested by the City Administrator in accordance with city ordinance.

- _____ 1) Land use classification of the development.
- _____ 2) Number of trips generated by the proposed development.
- _____ 3) Credit eligibility determination.

Authorized Agent