| Please provide a ger | neral description or scope o | f work for your bu | usiness: | | |
|---|---|----------------------|---------------------------|---------------------|---|
| | | | | | |
| | | | | | |
| F DOING ANY RETAIL | SALES (provide copy of cu | rrent no sales ta | x due letter) - | | |
| For businesses phys | sically located in Lee's Sun | mit this section | MUST be completed | | |
| Has your Physical Ac | ddress changed over the las | t vear? Y or N (I | f ves complete Zoning | Approval Form) | |
| | d in a Lee's Summit Commerce | | | | |
| | rusion alarm Y or N (circle) | | | | |
| Total Building Squa | | | | | |
| Employee Headcou Full Time: | nt for this location: | | | | |
| Part Time: 1 | | | | | |
| Temporary: | | | | | |
| IF DOING ANY RETAIL | L SALES (provide copy of curre | nt no sales tax due | e letter) - | | |
| IF PHYSICAL ADDRES | ofls.net. | S SUMMIT, PLEAS | E SUBMIT A NEW ZONIN | NG FORM. Zoning fo | rms located on |
| | | | | | |
| | | | | | |
| FEE CALCULATION (ple | ease check those that apply): | | | | |
| X \$50 | 0 Business License Fee (base f | ee) | | | |
| | nalty for delinquent license is 5 | | to exceed 25% (is deling | uent 60 days after | expiration) |
| | iaity for definiquent nectise is s | ,, o p c | | | |
| | al fee | | | | |
| I declare under penalt | y of perjury that to the best of | my knowledge a | nd belief the statements | s made herein are t | rue and correct. |
| 12 | | _ X | tylist | | 050 |
| ignature of Owner(s) | or corporation Agent/Owner | Title | 0 | | Date |
| : -: f + h = - | cation or the granting of a bust coning code, and is further sub- end businesses. Payment by Ch | iect to all applicat | ole feaeral, state and lo | cui iuws unu regulu | is regulated under tions which apply to |
| OR OFFICE USE ONLY icense Effective fro | | | Fee Remitted \$_ | License# | |