

*new owner*

# LEE'S SUMMIT MISSOURI

11/1/22 - 10/31/23

RECEIVED  
NOV 10 2022  
City of Lee's Summit  
Development Center

## Business License Application

220 SE Green Street  
Lee's Summit, MO 64063  
Phone 816.969.1220 / Fax 816.969.1221 / [www.cityofls.net](http://www.cityofls.net)

PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Date 11/01/22  
MM DD YY

New Business (Y/N) Y

In business since 2022

Frontier Justice  
Common/Preferred Name of Business (DBA)

Frontier Justice LS LLC  
Legal Name of Business (if different than DBA)

### Physical Business Address:

800 NE Jones Industrial Dr Lee's Summit MO 64064  
Address City State Zip

(916) 336-2600 ( ) ( ) invoices@frontier-justice.com  
Business Address Phone # Cell # Fax # Email

### Mailing Address: (if different from Physical Address)

Contact Name for Mailing Address: Vonda Schnelle  DBA  Legal Name  Other \_\_\_\_\_

Address City State Zip

( ) ( ) ( )  
Mailing Address Phone # Cell # Fax # Email

### Contacts:

Primary Contact: Jason Wagner President  
Name Title (Owner/Corp. Agent/Applicant)

800 NE Jones Industrial Dr Lee's Summit MO 64064  
Address City State Zip

(916) 336-2600 ( ) ( ) jason@frontier-justice.com  
Phone # Cell # Fax # Email

Date of Birth \_\_\_/\_\_\_/\_\_\_ KS  
MM DD YY Driver's License # State Issued

Secondary Contact: \_\_\_\_\_  
Name Title (Owner/Corp. Agent/Applicant)

( ) ( ) ( )  
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 30000 Missouri State Sales Tax Number 27754260

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: 24 Full Time 28 Part Time \_\_\_\_\_ Temporary

Please provide a general description or scope of work for your business (i.e. electrical contractor, doctor, retail store, etc.):

Retail sales firearms, accessories, boutique, home decor, personal training  
and indoor range

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
_____ 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: invoices@frontier-justice.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 Mandee Roode Tel # (405-464-5819) Alternate Tel # (816-330-2600)  
 b. Name Jason Wagner Tel # (913-744-7662) Alternate Tel # ( ) \_\_\_\_\_  
 c. Name Vanda Schaeffe Tel # (816-308-5539) 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			
<input type="checkbox"/>	Class A - General Contractor:	construct, remodel, demolish, repair any structure	
<input type="checkbox"/>	Class B - Building Contractor:	construct, remodel, demolish, repair all structures not exceeding 3 stories in height	
<input type="checkbox"/>	Class C - Residential Contractor:	construct, remodel, demolish, repair any single family, duplex or townhouse structure	
<input type="checkbox"/>	Class D - Mechanical Contractor:	perform mechanical (HVAC) services	
<input type="checkbox"/>	Class D - Electrical Contractor:	perform electrical services	
<input type="checkbox"/>	Class D - Plumbing Contractor:	perform plumbing services	
<input type="checkbox"/>	Please provide name of licensed representative (master) to be licensed	_____	Phone # ( ) _____
		Email _____	Cell # ( ) _____
<input type="checkbox"/>	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%  
 \_\_\_\_\_ 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] \_\_\_\_\_ Title President Date 11/1/2022

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 11/1/22 to 10/31/23 Fee Remitted 500 License # LE 44220785

**ZONING APPROVAL**  
FOR ALL BUSINESSES  
EXCEPT HOME OCCUPATIONS

DATE: November 10, 2022  
APPLICANT: Frontier Justice - Vonda Schelle  
BUSINESS NAME: Frontier Justice LS LLC  
ADDRESS: 800 NE Jones Industrial Drive  
TYPE OF BUSINESS: Retail  
TELEPHONE: 816-336-2600 ZONING DISTRICT: PMIX  
(To be completed by the Planning Dept.)

\_\_\_\_\_ NEW BUSINESS \_\_\_\_\_ CHANGE OF ADDRESS  
 CHANGE OF OWNERSHIP

If applicable, what type of business previously occupied the space? (Include name of business if known)  
Frontier Justice KCMO LLC - chg ownership  
Retail

If locating in a previously occupied space, are there any building structural, mechanical, plumbing or electrical alterations or additions proposed? If so, please describe the nature of the alterations or additions.  
NONE

Business Address  
(Administrative Use)

**AFTER THIS ZONING APPROVAL FORM HAS BEEN SIGNED, AN OCCUPANTIONAL/BUSINESS LICENSE APPLICATION AND FEE MAY BE ACCEPTED FOR FINAL PROCESSING IN THE FINANCE DEPARTMENT AT LEE'S SUMMIT, MISSOURI CITY HALL.**

NOTE: This form is required prior to acceptance of an application for an occupational/business license and issuance of a temporary permit to operate if the business location is within the limits of the City of Lee's Summit. New businesses with no physical location within the city do not require this form.

Vonda Schelle  
APPLICANT SIGNATURE

APPROVED BY: [Signature]  
DEPT. OF PLANNING & DEV.

[Signature]  
CODES ADMINISTRATION

\_\_\_\_\_  
FIRE DEPARTMENT

If checked, permits are required prior to performing any framing, mechanical, electrical or plumbing alterations or additions.

TAXATION DIVISION  
PO BOX 3000  
JEFFERSON CITY, MO 65105-3000



*Missouri*  
DEPARTMENT OF REVENUE

Telephone: 573-751-5860  
Fax: 573-522-1722  
E-mail: [businesstaxregister@dor.mo.gov](mailto:businesstaxregister@dor.mo.gov)

FRONTIER JUSTICE LS LLC  
800 NE JONES INDUSTRIAL DR  
LEES SUMMIT MO 64064-2374

11/07/2022

### CERTIFICATE OF NO TAX DUE

RE: Notice Number 2034253900  
MISSOURI ID: 27754260

To whom it may concern: The Department of Revenue, State of Missouri, certifies that the above listed taxpayer/account has filed all required returns and paid all SALES TAX due, including penalties and interest, or does not owe any SALES TAX, according to the records of the Missouri Department of Revenue, as of 11/07/2022. These records do not include returns that are not required to be filed as of this date for taxes previously collected or that have been filed but not yet processed by the Department.

This statement only applies to SALES TAX due and does not limit the authority of the Director of Revenue to assess, or collect liabilities under appeal, in default of an installment agreement entered into with the Director of Revenue or that become known to the Department as a result of an audit, a review of taxpayer's records, or a determination of successor liability.

THIS CERTIFICATE REMAINS VALID FOR 90 DAYS FROM THE ISSUANCE DATE.

TAXATION DIVISION