Expiration date: 06/30/2024



Business License Renewal

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

CARSTAR OF LEE'S SUMMIT Licensing 2509 NE INDEPENDENCE AVE LEES SUMMIT, MO 64064

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:

2509 NE INDEPENDENCE AVE LEES SUMMIT, MO 64064

Business E-Mail Address:: SUMMIT.CARSTAR@YAHOO.COM

Legal Name of Business: (if different than DBA): LEE'S SUMMIT AUTO BODY LLC

Type of Organization:

Retail Trade

Please provide your NAIC Code:

(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
8165243330	913-526-4509	8165243372

Contact Information:

Primary	Secondary	Emergency
NEIL BAKER, Address:307 NW LEANNE LN, Phone:(816) 582-1797	RYAN GLEN, Address:9641 DEER RUN ST, Phone:(913) 526-4509	NEIL BAKER, Phone:(816) 582-1797

(Continued on back page)

Please provide a general description or scope of	f work for your business:	
Ata Body Repair Service	0.	
F DOING ANY RETAIL SALES (provide copy of cur	rent no sales tax due letter) - 17805627	
For hunings and who singly located in Landa 9		
For businesses physically located in Lee's Sum	mit this section <u>MUSI</u> be completed*	
Has your Physical Address changed over the last		val Form)
Is business located in a Lee's Summit Commercia	al area or Residential? (circle)	
Do you have an intrusion alarm Yor N (circle) Total Building Square Footage - 17,000		
		"MERCA" - PAGE 18 - 18 - 18 - 18 - 18 - 18 - 18 - 18
Employee Headcount for this location: Full Time: 14 22		
Part Time:		
Temporary:		
IF DOING ANY RETAIL SALES (provide copy of current	no sales tax due letter) - 17805627	
IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S	SUMMIT, PLEASE SUBMIT A NEW ZONING FORE	M. Zoning forms located on
website at <u>www.cityofls.net</u> .	,	
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 a	days after expiration)
# 50 Total fee	per month not to exceed 25% (is definiquent 60 (uays after expiration)
Total fee		
I declare under penalty of perjury that to the best of m	ny knowledge and belief the statements made h	erein are true and correct.
× 2/m Mlm	X operations manager Title	51817070
Signature of Owner(s) or Corporation Agent/Owner	Title	Date
The filing of this application or the granting of a busine	ess license neither confirms nor annroves the use	e of land as regulated under
the provisions of the zoning code, and is further subjec	ct to all applicable federal, state and local laws a	nd regulations which apply to
specific occupations and businesses. Payment by Checl	k – make check payable to City of Lee's Summit.	
FOR OFFICE USE ONLY		
Eff.	/ / Fee Remitted S Lice	nse #