

Business License Renewal

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

HEAR USA
Licensing
11400 N JOG ROAD STE ~~300~~ 200
PALM BEACH GARDENS, FL 33418

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: 1001 NW CHIPMAN RD 117 LEES SUMMIT, MO 64081
Business E-Mail Address: ~~YESSENIA.SOTO@HEARUSA.COM~~ businesslicenses@hearusa.com
Legal Name of Business: (if different than DBA): AUDIOLOGY DISTRIBUTION LLC
Type of Organization: Retail Trade
Please provide your NAIC Code:

Renew on-line communications email address: businesslicenses@hearusa.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)

****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
8165543777		5615987274

Contact Information :

Primary	Secondary	Emergency
Lisa Barrett SARAH COHEN , Address: 11400 N JOG RD STE 300 , Phone: (561) 379-1315 200	SUSAN CUTTLER, Phone: (561) 346-2618	

(Continued on back page)

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

Hearing aid sales and service, hearing testing

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 21342482

uploaded 6/10/24

*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: 2

Part Time:

Temporary:

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IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S SUMMIT, PLEASE SUBMIT A NEW ZONING FORM. Zoning forms located on website at www.cityofls.net.

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)

 50.00 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 Lisa Barrett
Signature of Owner(s) or Corporation Agent/Owner

X Facilities Manager
Title

 6 / 10 / 24
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 #