Expiration date: 09/30/2024



Business License Renewal

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

Return to Nature LLC Licensing 1154 SW Santa Fe Drive Lee's Summit, MO 64081

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:

56 NE SYCAMORE ST LEES SUMMIT, MO 64086

Business E-Mail Address:: returntonaturels@outlook.com

Legal Name of Business: (if different than DBA): Return to Nature LLC

Type of Organization:

Retail Trade

Please provide your NAIC Code:

Renew on-line communications email address:

(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
8162725878		
		w

Contact Information:

Primary	Secondary	Emergency
Andrew Diekmann, Address:1154 SW Santa Fe Drive, Phone:(816) 529-7725	Megan Diekmann, Address:1154 SW Santa Fe Drive, Phone:(816) 729-3222	Andrew Diekmann, Address:1154 SW Santa Fe Drive, Phone:(816) 529-7725

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Please provide a general description or scope of	of work for your business:	
IF DOING ANY RETAIL SALES (provide copy of cu	urrent no sales tax due letter) - 26	6601184
For businesses physically located in Lee's Sur	mmit this section <u>MUST</u> be comp	leted
Has your Physical Address changed over the la Is business located in a Lee's Summit Commer Do you have an intrusion alarm? Yor N (circle Total Building Square Footage - 1, 925 sf	cial area or Residential? (circle)	oning Approval Form)
Employee Headcount for this location: Full Time: 2 Part Time: 0 Temporary: 0		
IF DOING ANY RETAIL SALES (provide copy of curre IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE' website at <u>www.cityofls.net</u> .		
FEE CALCULATION (please check those that apply):		
X \$50 Business License Fee (base for more for delinquent license is 5	ee) i% per month not to exceed 25% (is d	elinquent 60 days after expiration)
I declare under penalty of perjury that to the best of	f my knowledge and belief the statem	nents made herein are true and correct.
X V V V V V V V V V V V V V V V V V V V	X <u>UWYU</u> Title	
The filing of this application or the granting of a bus the provisions of the zoning code, and is further sub, specific occupations and businesses. Payment by Cha	ject to all applicable federal, state and	d local laws and regulations which apply to
FOR OFFICE USE ONLY License Effective from/	/ Fee Remitted	\$ License #