Expiration date: 08/31/2024



## **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>

Baker Distributing Company LLC Licensing 14610 Breakers Drive Jacksonville, FL 32258

## 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:

2716 NE MCBAINE DR LEES SUMMIT, MO 64064

Business E-Mail Address::saltbl@bakerdist.com

Legal Name of Business: (if different than DBA):

n DBA): Baker Distributing Company, LLC

Type of Organization:

Wholesale Trade

Please provide your NAIC Code:

Renew on-line communications email address: SALTBL@bakerdist.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
9044074477		

## Contact Information:

Primary	Secondary	Emergency
Rhonda Waag, Address:14610 Breakers Drive, Phone:(904) 407-4477		WES BURT, Address:2700 NE MCBAINE AVE, Phone:(816) 282-6411
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		C

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•		e of work for your business:			
HVAC/R Wholesa	aler		- 1		
DOING ANY RETAIL SAL	ES (provide copy of	current no sales tax due letter	) - 19686871	•	
			•		
or businesses physical	y located in Lee's S	Summit this section <u>MUST</u> be co	ompleted*		
Has your Physical Addres	s changed over the	last year?'Y orN (If yes comple	te Zoning Approval F	orm)	
Is business located in a	Lee's Summit Comm	ercial area or Residential? (circle)		,	
Do you have an intrusion		cle)			
Total Building Square Fo	otage - 10,252			,	
Employee Headcount for	rthis location:				
Full Time: 4 Part Time:					
Temporary:					
IE DOING ANY PETAIL SAL	ES (provide copy of cu	rrent no sales tax due letter) - 1968	6871		
IF PHYSICAL ADDRESS HAS website at www.cityofls.n		EE'S SUMMIT, PLEASE SUBMIT A N	EW ZONING FORM. Zo	oning forms located on	
		· · · · · · · · · · · · · · · · · · ·			
FEE CALCULATION (please	check those that apply	·):			
X \$50 Busi	ness License Fee (bas	e fee)			
		s 5% per month not to exceed 25%	(ic delinguent 60 days	after expiration)	
Penalty 1	or delinquent license i	s 5% per month not to exceed 23%	(is definiquent oo days	arter expiration,	
\$50.00 Total fee			,		
I declare under penalty of p	perjury that to the bes	t of my knowledge and belief the st	atements made hereir	are true and correct.	
X _Shilpa Patel, CPA		X Tax Director			
Signature of Owner(s) or C	orporation Agent/Owr	er Title		Date	
the provisions of the zoning	r code, and is further s	business license neither confirms no ubject to all applicable federal, stat Check – make check payable to City	e and local laws and re	and as regulated under egulations which apply to	