



Business License Renewal

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

Flat Branch Mortgage, Inc Licensing 101 S 5th Street Suite 200 Columbia, MO 65201

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: 3130 SW BLUE RIBBON ST LEES SUMMIT, MO 64082

Business E-Mail Address::licensing@fbhl.com

Legal Name of Business: (if different than DBA): Flat Branch Mortgage, Inc Type of Organization: Real Estate, Rental, Leasing

Please provide your NAIC Code:

Renew on-line communications email address: <u>licensing@fbhl.com</u>

(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 |
|------------|------|-----|
| 5734423850 | | |
| | | |

Contact Information:

| Primary | Secondary | Emergency |
|---|--|---|
| Flat Branch Holding Company/Flat Branch Mortgage Inc Retirement Savings Plan Trust, Address:101 S 5th Street, Phone:(573) 442-3850 | BETH LANGSTON, Address:3130 SW BLUE RIBBON, Phone:(816) 287-1024 | Flat Branch Holding Company/Flat Branch Mortgage Inc Retirement Savings Plan Trust, Address:101 S 5th Street, Phone:(573) 442-3850 |

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| Please provide a general description or scope of v | vork for your business: | |
|--|--|---------------------------------------|
| residential mortgage lending | | |
| | | |
| | | |
| | | |
| IF DOING ANY RETAIL SALES (provide copy of curre | ent no sales tax due letter) - | |
| | | |
| | | |
| *For businesses physically located in Lee's Summ | nit this section MUST be completed* | |
| | | |
| Has your Physical Address changed over the last y | | Approval Form) |
| Is business located in a Lee's Summit Commercial | area or Residential? (circle) | |
| Do you have an intrusion alarm? Y or (5) circle) Total Building Square Footage - | | |
| Total bulluling square Footage | | |
| Employee Headcount for this location: | | |
| Full Time: 1 Part Time: | | |
| Temporary: | | |
| IE DOING ANN DETAIL CALEGO | no sales tax due letter) - NA | |
| IF DOING ANY RETAIL SALES (provide copy of current i | no sales tax due letter) - INA | |
| IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S S website at www.cityofls.net . | UMMIT, PLEASE SUBMIT A NEW ZONING | FORM. Zoning forms located on |
| | | |
| | | |
| FEE CALCULATION (please check those that apply): | | |
| | | |
| X \$50 Business License Fee (base fee) | | |
| Penalty for delinquent license is 5% p | per month not to exceed 25% (is delinque | nt 60 days after expiration) |
| Tabelfore | | |
| Total fee | | |
| I declare under penalty of perjury that to the best of my | y knowledge and belief the statements m | ade herein are true and correct. |
| x_ Jamie Pandolfo | X President | 12 / 11 / 24 |
| Signature of Owner(s) or Corporation Agent/Owner | Title | Date |
| | !:: | the core of loved are resoluted and a |
| The filing of this application or the granting of a busine the provisions of the zoning code, and is further subject | | |
| specific occupations and businesses. Payment by Check | | |
| | | |
| FOR OFFICE USE ONLY | | |
| License Effective from/ to | / Fee Remitted \$ | License # |