Expiration date: 02/28/2025



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>

KANSAS CITY THERAPY, LLC Licensing 684 SE BAYBERRY LN, Unit 103 LEES SUMMIT, MO 64063

PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Please Update your Information. If th	nere are changes to the information provided, please draw a li	ne through and
correct.	ULO SE Bayberry Lane Suite 105 684 SE BAYBERRY IN 103 LEES SUMMIT, MO 64068 Levis	-1 1110
Physical Business Address:	684 SE BAYBERRY LN 103 LEES SUMMIT, MO 64063 Lees	Summit, MO
Business E-Mail Address:: MISTY@KA	NSASCITYTHERAPY.NET	04063
Legal Name of Business: (if different	than DBA):	0100
Type of Organization:	Health Care, Social Assistance	
Please provide your NAIC Code:		1

Renew on-line communications email address: Misty & Kansascitytherapy net (If you would like to renew on-line, you must provide an email above. This email address eould 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
8165993918	8166999681	8165993918

Contact Information:

Primary	Secondary	Emergency
MISTY DIXON, Address: 684 St. BAYBERRY LANE, SUITE 13, Phone: (816) 599-3918 600 St. Bayberry LN Switch 105 Lets Summit, Mo U4056	BERNADETTE BERHARDT, Address: 6845E BAYBERRY LANE; SUITE 103, Phone: (816) 599-3918 WOO SE Bayberry LIV SUIK 105 Lee S Summit, MO	CARL HUFF, Address:656 SE BAYBERRY LANE #101, Phone:(816) 524-1600 BERNADETTE BERHARDT, Address:684 SE BAYBERRY LANE, SUITE 103, Phone:(816) 599-3918

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Psychotherapy
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IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) -
For businesses physically located in Lee's Summit this section MUST be completed
Has your Physical Address changed over the last year Yor N (If yes complete Zoning Approval Form)
Is business located in a Lee's Summ(t Commercial) area or Residential? (circle) Do you have an intrusion alarm? Y or N (circle)
Total Building Square Footage - 11 (77)
Employee Headcount for this location: Full Time: 3
Part Time:
Temporary:
IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) -
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)
Penalty for delinquent license is 5% per month not to exceed 25% (is delinquent 60 days after expiration) Total fee
Total fee
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.
Total fee
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 Signature of Owner(s) or Corporation Agent/Owner Title 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
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 Signature of Owner(s) or Corporation Agent/Owner Title The filing of this application or the granting of a business license neither confirms nor approves the use of land as regulated under
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 Signature of Owner(s) or Corporation Agent/Owner Title 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.
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 Signature of Owner(s) or Corporation Agent/Owner Title 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
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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 Signature of Owner(s) or Corporation Agent/Owner Title The filling 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 3 / 12 Sto 2 / 28/2016 Fee Remitted \$ 50 License # License