Expiration date: 06/30/2025



## **Business License Renewal**

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

GUY GRONBERG ARCHITECTS Licensing 113 SE 3RD ST LEES SUMMIT, MO 64063

## 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: 113 SE 3RD ST LEES SUMMIT, MO 64063

Business E-Mail Address:: GUY@GUYGRONBERG.COM Legal Name of Business: (if different than DBA):

Type of Organization:

Professional Technical Service

Please provide your NAIC Code:

ess: guy @ guy gronberg. com

\*\*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
8165240878	8162605350	<del>-6165248578</del>

## Contact Information:

Primary	Secondary	Emergency
GUY GRONBERG, <b>Ad</b> dress:113 SE 3RD ST, Phone:(816) 524-0878		GUY GRONBERG, Address:113 SE 3RD ST, Phone:(816) 524-0878

(Continued on back page)

Please provide a general description or scope of		
IF DOING ANY RETAIL SALES (provide copy of cur	rrent no sales tax due letter) -	
*For businesses physically located in Lee's Sum	mit this section MUST be comp	elete d*
Has your Physical Address changed over the las	t year? Y o(N) (If yes complete Z	oning Approval Form)
Is business located in a Lee's Summit Commerci	iallarea or Residential? (circle)	,
Do you have an intrusion alarm? You (Vicircle)		
Total Building Square Footage - 2500		
Employee Headcount for this location:		
Full Time: 2		
Part Time: 1		
Temporary:		
IF DOING ANY RETAIL SALES (provide copy of curren	t no sales tax due letter) -	
IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S website at <u>www.cityofls.net</u> .	S SUMMIT, PLEASE SUBMIT A NEW	ZONING FORM. Zoning forms located on
FEE CALCULATION (please check those that apply):		
X \$50 Business License Fee (base fe	e)	
Described for delicence of the results	/	latin mant 60 days often expiration)
Penalty for delinquent license is 57	6 per month not to exceed 25% (is o	ennquent oo days after expiration)
Total fee		
I declare under penalty of perjury that to the best of	my knowledge and helief the stater	nents made herein are true and correct.
ruectare under penalty of perjury that to the best of	Ax lok	5,15,29
× // /	x Architact	2 12 2
Signeture of Owner(s) or Corporation Agent/Owner	Title	Date
The filing of this application or the granting of a busing the provisions of the zoning code, and is further subjectific occupations and businesses. Payment by Chemical Section 2015.	ect to all applicable federal, state an	d local laws and regulations which apply to
FOR OFFICE USE ONLY License Effective from// to _		d\$ License #