

Business License Renewal

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

VISIONWORKS #155 Licensing 175 E HOUSTON ST, FLR 6 SAN ANTONIO, TX 78205

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:

950 NW BLUE PKWY A LEES SUMMIT, MO 64086

Business E-Mail Address:: RVILLEGAS@VISIONWORKS.COM

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

Type of Organization:

Health Care, Social Assistance

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	
8162461327		8162461296 2105246635	

Contact Information:

Primary	Secondary	Emergency
REVE VILLEGAS, Address:175 E HOUSTON ST FLR 6, Phone:(816)		REVE VILLEGAS, Address:175 E
246-1327		HOUSTON ST FLR 6, Phone:(816) 246-1327

(Continued on back page)

Please provide a general description or scope of work for your busi	ness:
N/A	
F DOING ANY RETAIL SALES (provide copy of current no sales tax of	lue letter) - 18446256
For businesses physically located in Lee's Summit this section MI	<u>JST</u> be completed [⋆]
Has your Physical Address changed over the last year? Yor N (If ye	s complete Zoning Approval Form)
Is business located in a Lee's Summit Commercial area or Residential	? (circle)
Do you have an intrusion alarm?(Y) or N (circle) Total Building Square Footage - 3826	
iotal Building Square Footage - 3826	
Employee Headcount for this location:	
Full Time: 7 Part Time:	
Temporary:	
IF DOING ANY RETAIL SALES (provide copy of current no sales tax due lett	er) - 18446256
IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S SUMMIT, PLEASE SU website at www.cityofls.net .	BMIT 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% per month not to exc	eed 25% (is delinquent 60 days after expiration)
Total fee	
I declare under penalty of perjury that to the best of my knowledge and be	lief the statements made herein are true and correct.
x Authorized I	Representative 09 / 05 / 25
Signature of Owner(s) or Corporation Agent/Owner Title	Date
The filing of this application or the granting of a business license neither co the provisions of the zoning code, and is further subject to all applicable fec specific occupations and businesses. Payment by Check – make check payal	leral, state and local laws and regulations which apply to
	73
FOR OFFICE USE ONLY 125 to 630 2016	Fee Remitted \$ 50. License # 621441 \$