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 / <u>www.cityofls.net</u>

TRUE BLUE SERVICES INC Licensing PO BOX 6701 LEES SUMMIT, MO 64064

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:

4064 NE TIMBERLAKE CT LEES SUMMIT, MO 64064

Business E-Mail Address:: TRUEBLUESERVICES@COMCAST.NET

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

an DRA).

Type of Organization:

Construction

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
8163650503	SAME	8167951373

Contact Information:

Primary	Secondary	Emergency
ED SHAWBAKER, Address:4064 NE TIMBERLAKE CT, Phone:(816) 365-0503	PAM SHAWBAKER, Phone:(816) 536-5765	Emergency
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(Continued on back page)

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Small Plubing Repair	-
For businesses physically located in Lee's Summit this section MUST be completed	
Has your Physical Address changed over the last year? Y or N (If yes complete Zoning Approval Form)	٦
Is business located in a Lee's Summit Commercial area of Residential?) (circle)	
Do you have an intrusion alarm? YouN (circle)	
Total Building Square Footage - 340	
Employee Headcount for this location:	
Full Time:	
Part Time: Temporary:	
IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S SUMMIT, PLEASE SUBMIT A NEW ZONING FORM. Zoning forms located on website at www.cityofls.net.	
website at www.cityons.net.	
CONTRACTOR LICENSING INFORMATION ***Contractors – please complete this section***	
Please select type of contractor license requested - \$25.00 annual contractor license fee for each Class	
Class A – General Contractor: construct, remodel, demolish, repair any structure	
Class B – Building Contractor: construct, remodel, demolish, repair all structures not exceeding 3 stories in height	
Class C – Residential Contractor: construct, remodel, demolish, repair any single family, duplex or townhouse structure	
Class D – Mechanical Contractor: perform mechanical (HVAC) services	
Class D – Electrical Contractor: perform electrical services	
Class D – Plumbing Contractor: perform plumbing services	
Please provide name of licensed representative (master) to be licensed: FOSMUTARY Phone #: () 8/6-36500 CELL Phone #: () 8/6-36500 CELL Phone #: () 16/6-36500	503
Email: Troblus ervices (a) Cell #: ()	_
If renewal – provide 8 hours of CEU (please provide documentation of completion) or include optional in lieu of CEU fee of \$100.00 per lic classification	ense
FEE CALCULATION (please check those that apply):	
x \$50 Business License Fee (base fee)	
\$25 Contractor License Fee (\$25 for each license classification ie: Mechanical & Plumbing = \$50)	
\$100 Contractor fee in lieu of completion of 8 hours of annual continuing education (CEU) for each license classification	
Penalty for delinquent license is 5% per month not to exceed 25% (is delinquent 60 days after expiration)	
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 Day Shauboker X Sparchary 6 16 135 Signature of Owner(s) or Corporation Agent/Owner Title Date	
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.	
FOR OFFICE USE ONLY License Effective from 7 / 1 /75 to 1 /30 /26 Fee Remitted \$75 License #	

Please provide a general description or scope of work for your business:



KMIKESIC

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/4/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confor yights to the certificate holder in like set on the policy (see that the policy).

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Louisburg, KS 86953 Samples					PHONE FAX (A/C, No, Ext): (A/C, No):						
MSURES 1. True Blue Services Inc. Ed Shawbaker PO Box 6701 Lee's Summit, Mo 64064 **SUMER 9: **SU						E-MAIL ADDRE	_{ss:} cheryl@	elliottinsur	ancegroup.com		
MSURER 9: MSURER							INS	SURER(S) AFFO	RDING COVERAGE		NAIC #
True Blue Services Inc. Ed Shawbaker PO Box 6701 Lee's Summit, M0 64064 **REMERCE 1.** REPUISION NUMBER: REVISION NUMBER: RE						INSURE	RA: Acuity	Insurance (Co		14184
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JOHNSON COUNTY, KANSAS CONTRACTOR LICENSING

Certificate of Completion

ED SHAWBAKER

MR PLUMBER INC

For Attending

(2024) 10-24-24 24-7B Commercial Energy from Design to Plans to the Field (A,B,C,DE,DF,DFA,DM,DP,DR,DS,DW Code Credit)

AWARDED: 4.00 Hours of Continuing Education
October 24, 2024







JOHNSON COUNTY, KANSAS CONTRACTOR LICENSING

Certificate of Completion

ED SHAWBAKER

MR PLUMBER INC

For Attending

(2024) 10-24-24 24-7A Residential Energy From Design to Plans to the Field (A,B,C,DE,DF,DFA,DM,DP,DR,DS,DW Code Credit)

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