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>

JOSEPH SYMES CHIROPRACTIC LLC Licensing 400 SW LONGVIEW BLVD, Unit 160 LEES SUMMIT, MO 64081

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:

400 SW LONGVIEW BLVD 160 LEES SUMMIT, MO 64081

Business E-Mail Address:: DR.JOE@REJUVENATEKC.COM

Legal Name of Business: (if different than DBA):
Type of Organization:
Health

Health Care, Social Assistance

Please provide your NAIC Code:

Renew on-line communications email address: DR. JOE @ REJUYENATE KC. COM.

(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
8167613944	8168100932	8665663002
	7	

Contact Information:

Primary	Secondary	Emergency
JOE SYMES, Phone:(816) 810-0932	SCOTT SYMES, Address:400 SW LONGIVEW BLVD, STE 160, Phone:(816) 761-3944	JOE SYMES, Phone:(816) 810-0932
	(A. 37)	
S	*	

(Continued on back page)

FOO ING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 *For businesses physically located in Lee's Summit this section MUST be completed* Has your Physical Address changed over the last year? Yo(N) (if yes complete Zoning Approval Form) Is business located in a Lee's Summit (Commercia) area or Residential? (circle) Do you have an intrusion alarm? Yo(N) (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	Please provide a general description or scope	of work fo	or your busine	255:			
Has your Physical Address changed over the last year? Yo(N) (if yes completed* Has your Physical Address changed over the last year? Yo(N) (if yes complete Zoning Approval Form) Is business located in a Lee's Summit Commercial area or Residential? (circle) Do you have an intrusion alarm? Yo(N) (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	CHIEOPERCTIC						
Has your Physical Address changed over the last year? Yo(N) (if yes completed* Has your Physical Address changed over the last year? Yo(N) (if yes complete Zoning Approval Form) Is business located in a Lee's Summit Commercial area or Residential? (circle) Do you have an intrusion alarm? Yo(N) (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):							
Has your Physical Address changed over the last year? Yo(N) (if yes completed* Has your Physical Address changed over the last year? Yo(N) (if yes complete Zoning Approval Form) Is business located in a Lee's Summit Commercial area or Residential? (circle) Do you have an intrusion alarm? Yo(N) (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):							
Has your Physical Address changed over the last year? Yo(N) (if yes completed* Has your Physical Address changed over the last year? Yo(N) (if yes complete Zoning Approval Form) Is business located in a Lee's Summit Commercial area or Residential? (circle) Do you have an intrusion alarm? Yo(N) (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	F DOING ANY RETAIL SALES (provide copy of c	urrent nc	sales tax du	e letter) - 2	1875222		
Has your Physical Address changed over the last year? You (If yes complete Zoning Approval Form) Is business located in a Lee's Summi Commercia area or Residential? (circle) Do you have an intrusion alarm? You (Circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	(p		ouico tax de	e letter) - 2	00/3223		
Has your Physical Address changed over the last year? You (If yes complete Zoning Approval Form) Is business located in a Lee's Summi Commercia area or Residential? (circle) Do you have an intrusion alarm? You (Circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):							
Is business located in a Lee's Summit Commercia) area or Residential? (circle) Do you have an intrusion alarm? You (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	For businesses physically located in Lee's Su	mmit this	section MUS	T be comp	eted*		
Is business located in a Lee's Summi Commercia) area or Residential? (circle) Do you have an intrusion alarm? You (circle) Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	Has your Physical Address changed over the la	st year? \	on (If yes	complete Zo	ning Approval	Form)	
Total Building Square Footage - 1400 Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	Is business located in a Lee's Summi (Comme	rcial area o				,	
Employee Headcount for this location: Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):		2)					
Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	Total Building Square Footage - 1400	į.	//				
Full Time: 2 Part Time: Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	Employee Headcount for this location:		4				
Temporary: IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 20875223 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):	Full Time: 2						
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):	_						
FEE CALCULATION (please check those that apply):	remporary:						
FEE CALCULATION (please check those that apply):	IF DOING ANY RETAIL SALES (provide copy of curr	ent no sale	s tax due letter	1 - 20875223			
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)Total fee I declare under penalty of perjuny that to the best of my knowledge and belief the statements made herein are true and correct. X							
FEE CALCULATION (please check those that apply):	IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE Website at www.cityofls.net	'S SUMMI	T, PLEASE SUBI	MIT A NEW Z	ONING FORM	Zoning forms located o	n
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)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. XX	website at <u>inwinityons.net</u> .						
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)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. XX							
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) 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 PLESIDENT b							
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 PLESIDENT 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	FEE CALCULATION (please check those that apply):						
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 PLESIDENT 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	X \$50 Business License Fee (base)	iee)					
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 PLESIDENT 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		cc,					
I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are true and correct. X PLESIDENT 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	Penalty for delinquent license is	5% per mo	onth not to exce	ed 25% (is d	elinquent 60 d	ays after expiration)	
I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are true and correct. X PLESIDENT 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	Tetal for						
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	lotal fee						
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	I declare under penalty of perjury that to the best of	f my know	vledge and beli	ef the staten	nents made he	erein are true and correc	t.
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	,)))	v	PRESIDE	alt		b , 17	, 20
the provisions of the zoning code, and is further subject to all applicable federal, state and local laws and regulations which apply to	X	- ^ Title	120-00	,,			/
the provisions of the zoning code, and is further subject to all applicable federal, state and local laws and regulations which apply to			1.00		4		
						ia regulations which app	אן נט
	Specific decapations and businessess i dyment by a		pojub				
FOR OFFICE USE ONLY License Effective from / / to / / Fee Remitted \$ License #		,	/ c	aa Ramittaa	I Licor	ns	