Expiration date: 06/30/2024



Business License Renewal

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

C & S ACCOUNTING SOLUTIONS LLC Licensing P O BOX 6742 LEES SUMMIT, MO 64064

	PLEAS	SE NOTIFY US IF YOU DISCONTINU	JE YOUR BUSINESS.						
	Please Update your Information. If the correct.	re are changes to the informat	on provided, please draw a line through and						
Physical Business Address: 618 SE 4TH ST LEES SUMMIT, MO 64063 Business E-Mail Address:: CSACCOUNTING@COMCAST.NET admin@csactg. Legal Name of Business: (if different than DBA):									
	Type of Organization: Professional Technical Service								
	Please provide your NAIC Code:								
A *	Renew on-line communications email address:								
Business Phone Numbers :									
	Primary	Cell	Fax						
	8164773100 816-501-8259	8168682339	8164773101						

Primary	Cell	Fax
816-773100 816-501-8259	8168682339	8164773101

Contact Information:

Primary	Secondary	Emergency
SHIRLEY DAVIS, Address:100 NE HIDDEN MEADOW LN, Phone:(816) 868-2339	CYNTHIA WILSON, Phone:(816) 507-1988	

(Continued on back page)

Please provide a general description or scope of work for your business: A ccounting & Bookkeeping Services						
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? Y or (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? Y or (Circle) Total Building Square Footage -						
Employee Headcount for this location: Full Time: Part Time: 2 nonpaid officers Temporary:						
IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - n						
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):						
\$50 Business License Fee (base fee) **PLSD** 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 a x Signature of Owner(s) of Corporation Agent/Owner Title	are true and correct. Date
The filing of this application or the granting of a business license neither confirms nor approves the use of land the provisions of the zoning code, and is further subject to all applicable federal, state and local laws and reg specific occupations and businesses. Payment by Check — make check payable to City of Lee's Summit.	nd as regulated under Julations which apply to
FOR OFFICE USE ONLY License Effective from	