

RECEIVED
 JUN 30 2025
 City of Lee's Summit
 Development Center

Business License Renewal

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

CONTROL SERVICE CO INC
 Licensing
 3621 NE AKIN DR
 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: 3621 NE AKIN DR LEES SUMMIT, MO 64064
 Business E-Mail Address:: LEASTBURN@CONTROLSERVICE.COM
 Legal Name of Business: (if different than DBA):
 Type of Organization: Construction
 Please provide your NAIC Code:

Renew on-line communications email address: leastburn@controlservice.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
8166005800		8166005899

Contact Information :

Primary	Secondary	Emergency
MICHAEL RILEY, Address:10024 MEADOW LAKE CIR, Phone:(816) 600-5800	JOHN CROWNHART, Address:3350 NE RALPH POWELL RD, Phone:(816) 600-5800	MICHAEL RILEY, Address:10024 MEADOW LAKE CIR, Phone:(816) 600-5800

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

Building Automation system Controls Contractor

*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)
 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 - ~~6000~~ **25,000**

Employee Headcount for this location:
 Full Time: **7/94**
 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.

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: _____ Phone #: () _____
 Email: _____ 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 license classification

FEE CALCULATION (please check those that apply):

- \$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 *Lisa East* X *Office Administrator* *4/27/25*
 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 *7/1/25* to *6/30/2026* Fee Remitted \$ *50.00* License # *23141085*