

36467

Expiration date: 08/31/2025



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

TACO BELL #36467
 Licensing
 3120 S DURANGO DR STE 305
 LAS VEGAS , NV 89117

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: 851 NE WOODS CHAPEL RD LEES SUMMIT, MO 64064
 Business E-Mail Address:: SHERNANDEZ@DRGFOOD.COM
 Legal Name of Business: (if different than DBA): ROYAL CITY BELL LLC
 Type of Organization: Accomodation & Food Services
 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
7028805818		7028805819

Contact Information :

Primary	Secondary	Emergency
DANIEL PACKER, Address:3120 S DURANGO DR #305, Phone:(702) 880-5818	TODD KELLY, Phone:(702) 880-5818	

(Continued on back page)

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

Fast Food Restaurant

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 25066706

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 - 2000

Employee Headcount for this location:

Full Time: 29

Part Time:

Temporary:

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - 25066706

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):

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 Sofia + [Signature]
Signature of Owner(s) or Corporation Agent/Owner

X Office Manager
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 _____/_____/____ to _____/_____/_____ Fee Remitted \$_____ License # _____