



City of Holts Summit Business License Application

Date of Application: _____

Fees (Make checks payable to City of Holts Summit):

New License \$35.00 Renewal License \$35.00 Late Renewal License \$60.00

BUSINESS INFORMATION

Name of Business: _____

DBA (if applicable): _____

Business Address: _____

Type of Business (be specific): _____

OTHER INFORMATION (following information for city use only)

Business Manager: _____ Phone: _____

Approximate # of employees: _____ Intended Hours of Operation: _____

Owner: _____ Phone: _____

Business Mailing Address: _____

Business Email Address: _____

Missouri State Tax ID #: _____

Federal Employee ID # **OR** Driver's License #: _____

CONSTRUCTION COMPANIES ONLY

Provide Certificate of Insurance for Workers' Compensation Coverage or affidavit showing exemption.

Check here if certificate is attached

The information provided above is true, correct, and complete to the best of my knowledge.

Signature of Applicant: _____ Date: _____

Applicant Printed Name: _____ Title: _____

FOR CITY USE ONLY

ZONE: _____ LICENSE #: _____ AMOUNT PAID: _____ DATE: _____

FORM OF PAYMENT: _____ RCPT #: _____

CITY ADMINISTRATOR SIGNATURE: _____ DATE: _____

APPROVED DENIED

REASON FOR DENIAL: _____