



APPLICATION FOR BUSINESS LICENSE

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(License year July 1st through June 30th)

SECTION I: IDENTIFICATION INFORMATION

1. Name of establishment _____

Phone: Business Hours _____ Emergency Phone _____

2. Missouri State Sales Tax Number _____

3. Business Address _____ Zip _____

4. Home Office Address, if any _____

5. Ownership: Individual _____ Partnership _____ Corporation _____

6. If corporation, name of State where incorporated _____

7. Do you conduct commercial activities on the premises using names other than that for which you are making application? _____. If answer is yes, please list names below:

8. Date of last completed fiscal year (Calendar year if also fiscal year) preceding the license year beginning July 1st, as established and used for Federal Income Tax purposes: _____

Date Business began operations in City of Clarkson Valley: _____

9. Nature of activity: (Merchant or specific occupation or business. Describe activity in sufficient detail to indicate type of business. For example is a product sold, or a service, or both; and what is product or service?): _____

10. Name and address to which correspondence and renewal notice should be sent: _____

11. Number of employees: _____

12. Number of automobiles entering City of Clarkson Valley daily as a result of this operation: _____

SECTION II: FEE: \$75.00/ANNUM

SECTION III: CERTIFICATION

_____, hereby certifies that he/she is _____

(owner, partner, title of officer)

named firm, and is familiar with the operations of the applicant and the facts set out above and that they are true and correct according to the best of his/her knowledge, information and belief.

Signature

FOR CITY USE ONLY

Application and fee \$ _____ Received by _____ Date _____

License issued by _____ Date _____