



City of Neosho
 203 E. Main
 Neosho, MO 64850
 417-451-8050
 417-451-8065(fax)

New App Renewal

Date Application Rec'd _____

OFFICE USE ONLY	
License # _____	Check # _____
Lic Fee: _____	Cash \$ _____
Delinq. Fee: _____	Credit Card _____
Total Fees: _____	License Delivered _____
	Date _____

Application for Business License—Beginning October 1, 2017 & Ending September 30, 2018

OFFICE USE ONLY	
Zoning Approval & Classification (if <u>new</u> application) _____	Classification _____ Signature of Planning & Zoning _____
Fire Inspector Approval (if <u>new</u> application) _____	Date _____
City Finance Department Clearance _____	Date _____

Full Legal Name of Company _____
 List all other names used by the Company _____
 Business Address _____ City, State, Zip _____
 Mailing Address _____ City, State, Zip _____
 Name of Owner(s) of Company _____ Social Security Number _____
 Address of Owner(s) of Company _____
 Company is: Sole Proprietorship Partnership Corporation Limited Liability Co Other (describe): _____
 Is this business inside the Neosho City limits? Yes No Will this business make retail sales? Yes No
 Company Federal ID # _____ Company Missouri Tax ID # (MITS) _____
 Business Phone _____ Home/Cell Phone _____ Fax _____ E-Mail _____
 Principal Product or Service Provided/Nature of the Business _____

Vehicles for Hire—Taxicabs must attach a copy of Bond or Insurance as described in City Code § 625.190 along with paid receipt.

What is the amount of your GROSS SALES/REVENUE per year (check one)?

_____ \$0.00 to \$50,000 gross sales	\$10.00 fee	_____
_____ \$50,001 to \$100,000 gross sales	\$15.00 fee	_____
_____ \$100,001 to \$500,000 gross sales	\$20.00 fee	_____
_____ Over \$500,000 gross sales	\$25.00 fee	_____
_____ Security/Investigative Services	\$30.00 fee	_____
License Fee Due		_____
Delinquent Penalty (5% per month or part of month beginning with November)		_____
TOTAL DUE		\$ _____

By signing below, I certify that all the information contained in this Application and supplied in support hereof is true, complete and accurate. I further certify that I am and every individual working for or on behalf of Company is permitted under Federal Immigration laws to work in the United States. **I further certify that all taxes and fees now due and payable by the Company to the City are paid/current.**

X - Authorized Signature _____ Date: _____

Printed Name _____ Title _____

OFFICE USE ONLY	
_____	Date _____
License Clerk	