



2017 BUSINESS LICENSE APPLICATION/RENEWAL

CITY OF PECULIAR, MISSOURI

250 S. Main St.

PECULIAR, MISSOURI 64078

PHONE: 816-779-5212

FAX: 816-779-1004



TYPE OF LICENSE: (check all that apply) Business Construction Cigarette Sales

*NOTE-Business Licenses expire December 31 each year.

Failure to obtain Business License may result in a fifty dollar (\$50.00) penalty per month per Ord. #080409

(PLEASE PRINT)

Business Name: _____

Name of Representative: _____ Title: _____

Business Physical Address: _____ City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____ Cell: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Description of Type of Business: _____

Fed. Emp. ID No. / Bus. Owner's S. S. # _____ Mo. Retail Sales Tax No. _____

Business Owner's Name: _____

Business Owner's Home Address: _____ City _____ State _____ Zip _____

Business Owner Phone: _____ Fax: _____ Cell: _____ Email: _____

All required documentation and payment must be received, and inspections completed before license will be issued.

- Signed Business License Application & **Business License Fee of \$75.00**
- Copy of "paid" 2016 Cass County Real Estate & Personal Property Taxes receipt or exemption from Cass County Collector 816-380-8377
- If Contractor: Proof of Workers Compensation Insurance *or* signed statement of exemption.
- If Retail business: Certificate of "No Tax Due" from the Mo Dept. of Revenue: 573-751-9268
- Copy of annual fire inspection from West Peculiar Fire Protection District
- All businesses within the City limits (excluding construction and in-home businesses) are required to be inspected by the Codes Officer every 3 years before license will be issued at a cost of \$47.00.

It will take approximately 30 days to process the completed application and perform the Codes inspection.

Signature of Applicant: _____ Date: _____

New Business Approvals:

Zoning District Classification: _____ Approval Date: _____

Fire Department Approval: _____ Approval Date: _____

Office Use Only:

Business License (\$75.00)	License # _____	Fee Paid \$ _____
Cigarette License (\$ 1.00)	License # _____	Fee Paid \$ _____
Codes Inspection (\$47.00)	Date Completed: _____	Fee Paid \$ _____

Date Paid: _____ Total Fees Paid \$ _____ Cash _____ Check # _____