

City of Holts Summit
Retail Business License - 2020-2021

Requirements:

1. Complete Business License application and pay fee's.

You will not be allowed to open/do business in the City of Holts Summit, Missouri unless all requirements are met.

Completed applications (and all applicable documentation) with payment may be submitted:

In Person:

213 S. Summit Drive
Holts Summit, MO 65043

Or Mailed to:

Attn: Business Licensing
PO Box 429
Holts Summit, MO 65043

Beneficial References:

1. To register your business name, you may either go to the Missouri Secretary of State's office located at 600 W. Main Street, Jefferson City, MO, call (573) 751-4153 or go to their website. <http://www.sos.mo.gov/business/corporations/forms>
2. To decide which form of business entity you wish to establish, you may visit the local IRS office located at 3702 W. Truman Blvd. Jefferson City, MO, call (573) 635-6827 or go to their website. <http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/Business-Structures>
3. To apply for a Federal Employee Identification number, you may visit the local IRS office located at 3702 W. Truman Blvd. Jefferson City, MO, call (573) 635-6827, or go to their website. <http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/Employer-ID-Numbers-EINs>
4. To apply for a Missouri State Sales Tax number, contact the Missouri Department of Revenue at (573) 751-9268 or visit their website. <http://dor.mo.gov/business/>

If you have questions or concerns, please call (573) 896-8426



City of Holts Summit Retail Business License 2020-2021

The mission of the City of Holts Summit is to provide a safe, livable, and sustainable community for our present and future citizens

New

Renewal

Late

Business Name: _____

DBA: _____

Physical Address of Business: _____

Mailing Address of Business: _____

Phone #: _____ Fax#: _____

Email: _____

Type of Business/Goods/Services to be offered: _____

Approximate # of Employees: _____

Owners Name: _____

Owners Home Address: _____

Owners Phone #: _____

Missouri State Sales Tax Number: _____

Federal Employee ID Number or Drivers License #: _____

Hours of Operation: _____

Required to Carry Workers Compensation, Per Missouri State Statute 287.061? YES: _____ NO: _____

*If you answered yes, we will need a copy of your certificate. If you answered no, you must file an Affidavit of Exemption for Workers Compensation with our office (attached).

***Electricians and Plumbers must turn in proof of Certification with completed Application.**

I affirm that the information on this application is factual, that this business will be conducted in accordance with all applicable State and City Laws and that all City Taxes/Fees have been paid. I understand that if I am approved that any false statements made by me on this application may result in the revocation of this license.

Signature: _____ Date: _____

* Fee Schedule for Business License Attached.

*** Renewing License: A non-refundable fee of 25% of the license fee per application shall be charged in advance for each delinquent application for a business license that has expired.**

Office Use Only

License Fee: _____

Zone: _____

Form of Payment: _____

License #: _____

Receipt #: _____

Approved: Yes _____ No: _____

Reason For Denial: _____

City Administrator Signature: _____ Date: _____

Bracket (Table 1)

<i>Gross Receipts</i>	<i>License Cost</i>	<i>Gross Receipts</i>	<i>License Cost</i>
Less than \$50,000.00	\$25.00	\$1,500,000.00 - \$1,999,999.99	\$250.00
\$50,00.00 - \$99,999.99	\$50.00	\$2,000,000.00 - \$2,999,999.99	\$275.00
\$100,00.00 - \$249,999.99	\$80.00	\$3,000,000.00 - \$3,999,999.99	\$300.00
\$250,000.00 - \$499,999.99	\$120.00	\$4,000,000.00 - \$4,999,999.99	\$325.00
\$500,00.00 - \$749,999.99	\$160.00	\$5,000,000.00 and over	\$350.00
\$750,00.00 - \$999,999.99	\$200.00		
1,000,000.00 - \$1,499,999.99	\$225.00		

Estimate the gross sales volume of said business for the ensuing year beginning July 1st and ending June 30th (Table 1).

Enter License Cost (Table 1) based on estimated gross sales volume: \$ _____