



107 West Sears Avenue
Owensville, Mo 65066

573-437-2812- Voice
573-437-5812 – Fax
www.cityofowensville.com

Application for Business License

City License valid July 1st – June 30th

- **Name of Business** _____
- **Address of Business** _____

City State Zip
- **Name of Owner(s)** _____
- **Address of Owner** _____

City State zip
- **Mailing address** _____

City State Zip
- **Type of Business** _____
- **Business Phone Number** _____
- **Contact Phone Number** _____
- **Business Fax Number** _____
- **Date of Birth** _____
- **E-Mail** _____
- **Type of License:**

Manufacturing _____ \$50.00	Banking _____ \$40.00
Retail Sales _____ \$25.00	Occupation _____ \$10.00
Contractor _____ \$10.00	
Solicitor Etc. _____ \$25.00 a day--- Date(s) _____	
- **Owned by: Individual** ___ **Partnership** ___ **Corp.** ___ **LLC** ___
- **Include License fee and Certificate of Liability insurance**
- **Retail Sales License (ONLY) – requires:**
 - : Copy of your Sales Tax License**
 - : A (NO SALES TAX DUE) letter (573) 751-9268`**
- **Mo Sales Tax ID#** _____ **Federal ID#** _____

Emergency contact if applicant can't be reached

Name- _____ Number- _____

How many employees, as defined by Chapter 287 RSMo, to maintain Worker's Compensation Insurance coverage for your employees?

_____ *Yes-Attach a copy of Certificate of Insurance*

_____ *No -Exempt*

I _____ hereby declare the above information is true and authorize the Owensville Collector to investigate any information contained herein to issue the requested permit.

Under Oath, I affirm that I participate in a Federal Work Authorization Program and do not and shall not employ any person who does not have the legal right or authorization under Federal Law to work in the United States. (Missouri HB 1549)

Print Name

Signature

Date

(Office Use Only)

Approved/Rejected _____

City Collector

Date

Business Owes No Taxes To City

Owner Owes No Taxes To City

Business Owes No Taxes To County

Business Owes No Sales Tax