



22601 Main Street • P.O. Box 171 • Reeds Spring, Missouri 65737

Dear Business Owner,

A Business License is required for any business, trade, or profession, as defined by the State Legislature in Missouri Revised Statutes Section 94.270, legally conducting business within the limits of the City of Reeds Spring. This does include businesses from outside the city limits who also conduct business within the city limits.

Attached is a Business License Application. Please complete and return this form to the Reeds Spring City Clerk, along with the following:

- \* A copy of your State of Missouri Tax ID Exemption letter. (For Non-Profit Business)
- \* A copy of your Missouri Retail Sales License. (For business that charges sales tax on goods.)
- \* A copy of your Worker's Compensation Insurance Certificate or an Affidavit of Exemption for Workers'

Compensation Insurance.

- \* A Certificate of Liability Insurance

I now have Web access with the Missouri Department of Revenue to verify that each applicant has no outstanding sales, use or withholding tax debt. If a "no tax due" response is not received, your application will be denied.

Any business within a building or structure that serves customers in said building or structure is required to have the City Inspector certify the premises. All new applicants will be required to obtain a Safety Inspection Certificate from the City before being issued a Business License. Renewals will be subject to physical inspections annually and at the discretion of the City Building Inspector.

The cost of a City Business License is as follows:

Businesses requiring Safety Inspection Certificate.....	\$38.00/year
All other businesses .....	\$20.00/year

Each business shall display its license in a prominent place on the premises and in such a manner that it can easily be seen at all times. Those licensees who do not have a physical location within the city limits shall have the license with them and readily available when conducting their business in the City of Reeds Spring. The license must be shown to any City officers having authority to enforce the City's Business License Ordinance and, upon request, to persons with whom they are conducting business.

All License will need to be renewed by March 1st. of every year.

Sincerely,

Rose M. Warriner, City Clerk

c: Mayor

**City of Reeds Spring**  
**APPLICATION FOR BUSINESS LICENSE**

P.O. Box 171  
22601 Main Street  
Reeds Spring, MO 65737  
Phone: 417-272-3309 - Fax: 417-272-8015

Date of application: \_\_\_\_\_ New: \_\_\_\_\_ Renewal: \_\_\_\_\_ Liquor License\*\*: \_\_\_\_\_

Business name: \_\_\_\_\_

Physical address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Nature of business: \_\_\_\_\_

Bus. phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Bus. website: \_\_\_\_\_ Bus. email: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Owner email: \_\_\_\_\_

EIN: \_\_\_\_\_ Sales tax ID: \_\_\_\_\_

Workers comp. ins. certificate: \_\_\_\_\_

OR affidavit of exemption for workers comp. ins.: \_\_\_\_\_

\*\* A copy of your Retail and/or Liquor License must be submitted with this application

**I certified that the above information is true and I agree to abide by all City Codes**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

Home based business      No \_\_\_\_\_      Yes \_\_\_\_\_

Inspection required?      No \_\_\_\_\_      Yes \_\_\_\_\_

Inspection complete? \_\_\_\_\_

Amount paid: \_\_\_\_\_ Date paid \_\_\_\_\_ Receipt # \_\_\_\_\_

Approved by: \_\_\_\_\_ Denied by: \_\_\_\_\_

License # \_\_\_\_\_

**Business Licenses must be renewed annually March 1st**