



## City of Washington

### Business License Application

405 Jefferson St • Washington, MO 63090 • (636) 390-1047 • [hparker@washmo.gov](mailto:hparker@washmo.gov)

Business Licenses Are Renewable Yearly by July 1

Date Received:

| Business Information  |                      |        |      |
|---|----------------------|--------|------|
| Business Name:  |                      |        |      |
| Doing Business As:  |                      |        |      |
| Physical Address <i>(Cannot be P.O. Box)</i>                              |                      |        |      |
| Street:   | City:                | State: | Zip: |
| Mailing Address <i>(If different from above)</i>                          |                      |        |      |
| Attention:  |                      |        |      |
| Street:   | City:                | State: | Zip: |
| Phone   |                      |        |      |
| Primary:  | Alternate:           | Cell:  |      |
| Fax:  |                      |        |      |
| E-mail Address:   |                      |        |      |
| Federal Tax ID#:  | Missouri Sales Tax#: |        |      |
| Description of Business:  |                      |        |      |
| Number of Employees <i>(that will be working within the city limits):</i> |                      |        |      |
| Date to Open:   |                      |        |      |
| Owner Information   |                      |        |      |
| Owner's Name:   |                      |        |      |
| Home Address:   |                      |        |      |
| Street:   | City:                | State: | Zip: |
| Phone Number:   |                      |        |      |

I declare under penalty of perjury that this application has been examined by me and that the statements made herein are in good faith pursuant to State and City regulations and, to the best of my knowledge and belief, are true, correct and complete.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

We accept cash, check, and card. Make checks payable to: City of Washington

| License Requirements   |  |
|--|--|
| <ul style="list-style-type: none"> <li>Any outstanding fees owed to the City must be paid before a license will be issued</li> </ul>   |  |
| <b><i>If the business will be occupying a physical location within the City, then:</i></b>   |  |
| <ul style="list-style-type: none"> <li>You must obtain a Certificate of Occupancy from the Engineering Department.</li> <li>You must complete and remit the Emergency Callout Letter for the Director of Communications.</li> </ul>                                      |  |
| <b><i>If the business will be selling goods at retail, or if you will be providing lodging, then:</i></b>  |  |
| <ul style="list-style-type: none"> <li>You must submit a copy your State of Missouri Sales Tax License acquired from the Missouri Department of Revenue.</li> </ul>  |  |
| <b><i>If you are a contractor, then:</i></b>   |  |
| <ul style="list-style-type: none"> <li>You must supply either a current Certificate of Insurance showing Workers' Compensation coverage – OR – a completed and notarized Affidavit of Exemption.</li> </ul>  |  |
| <b><i>If you will be offering massage, then:</i></b>   |  |
| <ul style="list-style-type: none"> <li>You must supply a State of Missouri Massage License Therapist Certificate for each person who will be performing massage.</li> </ul>  |  |
| <b>Taxicabs, Bus Services, Mobile Food Trucks, Pawn Brokers, Security Guards, Sale of alcohol and/or cigarettes have additional licensing requirements. Contact us at (636) 390-1047 or <a href="mailto:hparker@washmo.gov">hparker@washmo.gov</a> for more details.</b> |  |

| Fees  |  |
|---|--|
| <b><i>General Business (all businesses excepting Specialties, Manufacturers, and Massage Therapists)</i></b>  |  |
| License Fee: \$60.00 prorated monthly, plus<br>Employee Fee: \$2.00 per employee  |  |
| <b><i>Specialty Business (Astrologers, Carnivals, Circuses or menageries, Clairvoyants, Fortune-tellers, Junk Dealers, Recycling Centers, Mediums, Palmists, Tattooists, Slate writers, Billiard halls, Video/electronic Arcades)</i></b> |  |
| License Fee: \$250.00 prorated monthly, plus<br>Employee Fee: \$2.00 per employee   |  |
| <b><i>Manufacturers</i></b>   |  |
| If less than or equal to 75 employees: \$75<br>If more than 75 employees: \$1 per employee  |  |
| <b><i>Massage Therapists</i></b>  |  |
| \$30 for each Therapist   |  |

| Contact Information      |                |   |
|--------------------------|----------------|---|
| Business Licensing       | (636) 390-1047 | <a href="mailto:hparker@washmo.gov">hparker@washmo.gov</a>  |
| Engineering Department   | (636) 390-1010 | <a href="mailto:jwalters@washmo.gov">jwalters@washmo.gov</a> or<br><a href="mailto:gvanek@washmo.gov">gvanek@washmo.gov</a> |
| MO Department of Revenue | (573) 751-5860 | <a href="mailto:businesstaxregister@dor.mo.gov">businesstaxregister@dor.mo.gov</a>  |