



**City of Lake Saint Louis
Business License Annual Renewal Form**

Please be advised that if you have a current Lake Saint Louis Business License it will expire on June 30, 2019. If your business has **remained unchanged** (business type, ownership, mailing address, # of employees, etc.) you may renew your license using this form. You are required to renew your license within 30 days prior to the expiration date. Note that in accordance with [Chapter 600, Section 605.140](#) of the City Code, no license will be issued to any person until all taxes, including real estate, have been paid.

Submit this completed form & any required paperwork via one of the methods below:

- Email to cityclerk@lakesaintlouis.com
- Fax to 636-625-4229
- Mail to:
City of Lake Saint Louis
Attn: City Clerk
200 Civic Center Drive
Lake Saint Louis, MO 63367

License Fee Payments: The fee schedule in City Code [Chapter 605, Section 605.160](#)

- If you are submitting your completed form via email or fax you will need to pay your fee online by following the payment instructions on our City website business licenses page www.lakesaintlouis.com. **Provide your online payment confirmation # _____ and amount paid \$ _____.**
- If you are mailing or dropping off your completed form then you will need to enclose payment (checks should be made payable to "City of Lake Saint Louis").

Current Business License # _____ Licensee Name (on current license): _____

Business Name (on current license): _____

Business Owner Name: _____ Date of Birth (required): _____

Manager's Name (if different than above): _____

Business Location Address: _____

Mailing Address (if different than above): _____

Business Phone: _____ Fax: _____ Email Address: _____

Missouri Sales Tax No.: _____ Number of Employees: _____

Cigarette Sales: Yes No *If Yes, Provide Name & Address of your Supplier/Wholesaler:* _____

Please see Page 2 for additional required documents and signature line

ADDITIONAL DOCUMENTS REQUIRED (by business type):

ALL APPLICANTS MUST:

- Submit Completed and Signed Application
- Pay License fee (fee schedule [City Code Chapter 605, Section 605.160](#))

RETAIL SALES - businesses where goods are sold at retail:

- Missouri Tax ID Number
- Copy of Missouri Retail Sales License
- No Tax Due Statement (Not More than 90 Days Old and Doing Business in City of Lake Saint Louis)

FOOD SALES - businesses preparing/selling food:

- Copy of Saint Charles County Health Department Permit
- Missouri Tax ID Number
- Copy of Missouri Retail Sales License
- No Tax Due Statement (Not More than 90 Days Old and Doing Business in City of Lake Saint Louis)

CONTRACTORS:

- Copy of Current Worker's Compensation Coverage (Required by RSMo 287.061) (Listing **The City of Lake Saint Louis, 200 Civic Center Drive, Lake Saint Louis, MO 63367** as the Certificate Holder), or Affidavit of No Coverage

ARBORIST:

- Completed Annual Arborist License Application
- Copy of Current Liability Coverage (Listing **The City of Lake Saint Louis, 200 Civic Center Drive, Lake Saint Louis, MO 63367** as the Certificate Holder)
- Proof of ISA Certification

Acknowledgements and Authorization Signature

I, the undersigned, do hereby authorize submittal of the application and associated documents and certify and affirm by my signature all information I have provided herein is true and correct. I understand that this application is non-transferable and that changes may require submittal of a new application.

Printed Name: _____ Title: _____

Signature: _____ Date: _____

If you have any questions, please contact cityclerk@lakesaintlouis.com or (636) 625-1200

DO NOT WRITE IN THIS SPACE - CITY USE ONLY

License Fee: \$ _____ check # _____ cash receipt # _____ cc conf. # _____

City taxes/fees paid: Yes No Verified by: _____ Date: _____