



City of Pleasant Hope
304 E Miller Street
417-267-2112

BUSINESS LICENSE APPLICATION

License Year – July 1 thru June 30

Approval of your application is subject to compliance with the Zoning Regulations of City of Pleasant Hope

If your business location is being remodeled, a building permit must be obtained from the Public Works 417-655-3855.

OPERATING NAME OF BUSINESS _____ DATE : _____

BUSINESS STREET ADDRESS _____

MISSOURI SALES TAX # _____ NO. OF EMPLOYEES: _____

APPLICATION FEE: **\$25.00**

This application shall be accompanied by a proper remittance reflecting the appropriate license fee made payable to the City of Pleasant Hope.

A. INFORMATION REGARDING BUSINESS:

1. Type & nature of business (in detail):

Retail _____ Wholesale _____ Food Service _____ Manufacturing _____
Home Based Business _____ Light Manufacturing _____

2. Sole Ownership _____ Partnership _____ LLC _____ Corporation _____

3. Legal Name of Business _____

4. Mailing Address of Business: _____

5. Business phone # _____ Primary Owner's Phone # _____

6. Is your business and property insured? Y/N _____ What type of coverage _____

B. INFORMATION ABOUT THE APPLICANT

1. Applicant is: Owner _____ Manager _____ Agent _____

2. Full Name of Applicant: _____

3. Complete Home Address of Applicant: _____

