



Community Development Department
Business License Division
10000 E 59th Street • Raytown, MO 64133
Phone: 816-737-6014 • Fax: 816-737-6164

BUSINESS LICENSE CHECKLIST

New Gross Receipts (Retail) Business Located Outside City Limits of Raytown

- _____ Business License Application
- _____ Copy of Driver's License
- _____ Statement of Estimated Gross Receipts
- _____ Copy of Real Estate Taxes Paid Receipt*/ **
- _____ Copy of Personal Property Tax Paid Receipt **
- _____ Missouri Retail Sales License or exemption therefrom***
- _____ Fee (Cash, Credit or Check)

*Only required if you own the building you are doing business out of

**Only required if your business is based in Jackson County

***Not required for Auto Dealers



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RAYTOWN BUSINESS LICENSE APPLICATION

Date: _____ Missouri Tax ID Number _____

Name of Business: _____

DBA (if different) _____

Ownership Status: Individual _____ Partnership _____ Corporation _____ LLC _____

Description of merchandise or services offered: _____

Retail _____ Contractor _____ Sales: _____ Bank: _____ Vending: _____ Other: _____

Is this a home based business? Yes _____ No _____ Date business will begin in Raytown _____

Physical Address of Business _____

City _____ State _____ Zip _____

Business Phone Number _____ Office Phone Number _____

Local Contact Name _____ Title _____

Cellphone Number _____ Email _____

List Names of Owners, Partners or Officers of Company (Use additional page if more than one)

Full Name _____

State Drivers Lic # _____ Date of Birth _____ Phone _____

Address: _____

Do you store, manufacture or transport any hazardous materials? Yes _____ No _____

I DECLARE UNDER PENALTY OF LAW THAT TO THE BEST OF MY KNOWLEDGE THAT THE STATEMENTS MADE HEREON ARE CORRECT AND TRUE.

Signature _____ Title _____ Date _____

FOR OFFICE USE ONLY	
Business License Number:	Renewal
Notes:	



STATEMENT OF GROSS ANNUAL RECEIPTS

Please complete and return this form to complete your renewal of your occupational license. To ensure receipt of a new license please return the documents requested in the accompanying letter along with payment (fees on reverse side).

NAME OF BUSINESS _____ Mo. Tax ID No. _____

OWNER(S) NAMES _____

STATE DRIVERS LICENSE # _____ DATE OF BIRTH(S) _____

E-MAIL ADDRESS _____

Form box containing: CHECK HERE IF BUSINESS INFORMATION HAS CHANGED - FILL OUT THIS SECTION ONLY IF THERE IS A CHANGE. NEW ADDRESS OF BUSINESS, NEW MAILING ADDRESS, NEW PHONE, NO LONGER IN BUSINESS PLEASE INDICATE EFFECTIVE DATE.

PLEASE INDICATE BELOW YOUR GROSS RECEIPTS* ENDING DECEMBER 31, 2017 OR YOUR LAST FISCAL YEAR. IF YOU HAVE NOT BEEN IN BUSINESS FOR A FULL YEAR, PLEASE LIST THE GROSS RECEIPTS YOU HAVE ACCUMULATED AND INDICATE THE TIME FRAME.

I HEREBY CERTIFY THAT THE TOTAL GROSS RECEIPTS ON THE ABOVE ADDRESS ARE:

\$ _____ ENDING DATE _____

SIGNED _____ TITLE _____ DATE _____

*For Business located within Raytown: use the TOTAL GROSS REVENUE generated by your company BEFORE ANY DEDUCTIONS are made for expenses commissions, taxes or any other items.

*For Business located outside of Raytown use the TOTAL GROSS REVENUE generated by your company in the city of Raytown BEFORE ANY DEDUCTIONS are made for expenses, commissions, taxes, or any other items.

VENDING MACHINES

Number of vending machines at your business location? _____

Vending machines include snacks, soda, candy, cigarettes, video games, copy machines and any machine that money is placed into. DO NOT INCLUDE LOTTERY TICKET MACHINES OR NON-PROFIT MACHINES.



SCHEDULE OF FEES – GROSS RECEIPTS

\$0 - \$5,000	\$25.00
\$5,001 - \$50,000	\$35.00
\$50,001 - \$70,000	\$40.00
\$70,001 - \$90,000	\$45.00
\$90,001 - \$100,000	\$50.00
\$100,001 - \$120,000	\$60.00
\$120,001 - \$140,000	\$70.00
\$140,001 - \$160,000	\$80.00
\$160,001 - \$180,000	\$90.00
\$180,001 - \$200,000	\$100.00
\$200,001 - \$500,000	\$100.00 + \$0.50 per each additional \$1,000
\$500,001 +	\$250.00 + \$0.30 per each additional \$1,000

BANKS – \$20.00 per each \$1,000,000

VENDING MACHINES - \$5.00 per each machine

PENALTY – Each month delinquent is 10% of the fee. Non-payment may result in legal action.

<p><input type="checkbox"/> Yes, I would like to take advantage of a two-year license renewal by sending in double the fee required for one year.</p>
