BUSINESS LICENSE APPLICATION

Licenses are valid from August 1st to July 31st

PLEASE PRINT LEGIBLY	OFFICIAL USE ONLY
Business Name	Date Received
Rock Hill Address	Business License NO
City State Z	
Mailing Address	Total Amount Paid
(If Different) City State Z	Dlama Charle One
Business Phone	New Application ()
Business Fax	Change of Owner () Change of Address ()
Type of Business Operation	
E-Mail Address	Renewal ()
ENTER BELOW NAMES OF OWNER, PARTNERS, OR CORPORATE OFFICERS (Attach additional sheets as needed)	
Owner / Corporation Name	
Address	
Street Cit	ty State Zip Code
Phone Number	Fax Number
Missouri Sales Tax I.D. Number	(attach a copy of State form to application)
LICENSE FEE CALCULATION	
THE LICENSE FEE IS BASED ON A COMBINATION OF FLOOR SPACE AND NUMBER OF EMPLOYEES. CALCULATE LICENSE FEE AS FOLLOWS:	
FLOOR SPACE @ \$5 PER 1,000 Square Feet or fraction thereof = \$	
NUMBER OF EMPLOYEES (including Owner and/or manager)	
\$10 per employee up to 10 and \$5 per employee in ex	
TOTAL AMOUNT DUE (floor space and employees combined) = \$	
MINIMUM FEE IS \$25	
LATE PAYMENT PENALTY IS FIGURED AT 20% PER MONTH STARTING AUGUST 1^{ST} , AND THE FIRST DAY OF SUBSEQUENT MONTHS AFTER AUGUST 1^{ST} , UP TO 100% OF THE TAX DUE. NO EXCEPTIONS.	
LATE FEE = \$	TOTAL TO BE PAID = \$
Person submitting this form must complete the following:	
Print Name / Title	
Signature Date	

PLEASE RETURN APPLICATION TO ADDRESS BELOW AND MAKE CHECKS PAYABLE TO CITY OF ROCK HILL