



**OCCUPATION and/or
CONTRACTOR/CRAFTSMAN
LICENSE APPLICATION**

**LICENSE YEAR
JULY 1 THRU JUNE 30**

Ph. (816) 439-4417 Fax (816) 439-4419
Website: www.ci.liberty.mo.us
Mail to: Deputy City Clerk, City of Liberty
P. O. Box 159, Liberty, MO 64069

All information provided is true and correct and provided under penalty of perjury.

Check all that apply:

- | | | |
|---|--|--|
| <input type="checkbox"/> PAYMENT ENCLOSED _____
(SEE FEE SCHEDULE ON 2nd Page) | <input type="checkbox"/> SOLE PROPRIETORSHIP | <input type="checkbox"/> HOME BUSINESS |
| <input type="checkbox"/> NEW BUSINESS
(SEE GENERAL INFORMATION ON 2nd Page) | <input type="checkbox"/> PARTNERSHIP | <input type="checkbox"/> RETAIL SALES |
| <input type="checkbox"/> RENEWING BUSINESS | <input type="checkbox"/> LLP | <input type="checkbox"/> CONTRACTOR |
| | <input type="checkbox"/> CORPORATION | <input type="checkbox"/> CRAFTSMAN ONLY |
| | <input type="checkbox"/> LLC | <input type="checkbox"/> INDUSTRIAL |
| | <input type="checkbox"/> NOT FOR PROFIT | <input type="checkbox"/> STATE LIQUOR LICENSE (SEE SEPARATE APPLICATION) |
| | <input type="checkbox"/> OTHER | |

OWNER: _____ CORPORATION NAME _____

SSN OR FEIN _____ BUSINESS NAME (DBA) _____

MAILING ADDRESS: _____ CITY/STATE/ZIP _____

PHONE: (_____) _____ - _____

LICENSE AND ALL CORRESPONDENCE WILL BE SENT TO MAILING ADDRESS

Business Address (No PO's): _____

City/State/Zip: _____

BUSINESS PHONE: (_____) _____ - _____

DESCRIBE BUSINESS:

EMERGENCY CONTACT IF BUSINESS LOCATED IN LIBERTY: NAME: _____ PHONE (_____) _____ - _____

<p>Short Term Event:</p> <p>Date(s) of event: _____</p> <p>Location: _____</p>

<p align="center">*WORKER'S COMPENSATION EXEMPTION STATEMENT*</p> <p>I hereby certify that the business described in this application is exempt from the requirements of the Missouri Worker's Compensation Law and, therefore, per Section 287.061 RSMo, is not required to provide the city with a Certificate of Insurance but is signing this statement of exemption.</p> <p>Signature of Contractor or Authorized Agent _____</p>

<p align="center">*CRAFTSMAN LICENSE STATEMENT *</p> <p>Individuals named below as craftsmen have passed a proficiency test for the applicable trade with a 75% or better score OR hold a certificate of qualification from the City of Kansas City, Missouri for the master level equivalent for which application is being made and have submitted a copy of the certification with this application.</p> <p>Electrical _____ Plumbing _____ Mechanical _____</p>

<p align="center">*RETAIL SELLERS *</p> <p>Beginning January 1, 2009, the possession of a statement from the department of revenue stating no tax due is a prerequisite to the issuance or renewal of any city occupation license required for conducting any business where goods are sold at retail. The statement of no tax due shall be dated no longer than ninety days before the date of submission for application or renewal of the city license. Business owners may access the on-line system at http://dor.mo.gov/tax/business/sales/notaxdue/ to acquire a statement of no tax due by entering their Missouri tax identification number and pin number located on their sales tax return or voucher.</p>

I hereby state the following:

- that the above are true and accurate statements, and in accordance with valid city ordinances;
- that this business will be conducted in compliance with all applicable Missouri state laws and Liberty city ordinances, including Section 30-80.1. of the City of Liberty Unified Development Ordinance, should this business be conducted as a home occupation in Liberty;
- that all personal taxes due to the City of Liberty from the owner(s) of such business and all preceding merchant taxes for such businesses have been paid;
- that the business will be operated in a fair, reasonable and responsible manner without misrepresentation, fraud, willful misconduct or false statement;
- that, if the business ceases operating for any reason, all licenses will be immediately returned to the city clerk;
- that, if there are changes or transfer of ownership, changes of address or changes in type of business conducted, the city clerk will be notified.

***Note:**
Original signed application must be submitted, signed by the owner or officer or authorized agent of the company.

Print your name and title: _____

Signature _____ Date signed _____
(Owner/Officer/Authorized Agent)

[For City Use Only]	
Occ. Lic 10.20.3052	
OL Penalty 10.20.3052	
Craftsman 10.20.3051	
Other	
Total	

The occupation license fee is based on gross annual receipts, commissions or business in Liberty for the preceding 12 months. City Code Sec. 18-13.1 allows the deputy city clerk to examine business records relating to gross receipts, commissions or business upon which fees are based. Fees may be pro-rated after January 1 for new businesses only.

General Information To Applicants

Contractors: State law requires all contractors to provide a certificate of insurance for Worker's Compensation coverage. If exempt from this state requirement sign the workers' compensation statement on application.

Contractors with a craftsman named on the application must submit additional licensing fees and a copy of the craftsman certification. Contractors working with the City of Liberty must provide a certificate of liability insurance, with the City named as an additional insured for the project.

Liberty requires all businesses to submit a copy of your Business registration (Corp., LLC, etc.).

New Liberty based businesses:
 Submit a copy of your Business registration (Corp., LLC, etc.). Contact the Secretary of State at 816-889-2925 for assistance.
 Submit a copy of your Business Personal Property registration. Call the Clay County Assessor at 816-407-3500 for assistance in obtaining this document.

New Retail:
 Sales of perishable food or beverages may require a permit from the Clay County Health Dept. Call 816-595-4200 for assistance. A copy of your Missouri retail sales tax license or use tax showing the Liberty location and a No Tax Due Statement is needed if selling at retail. Call the MO Dept of Revenue at 816-889-2944 for assistance in obtaining these documents.

Contact Liberty's development department at 816-439-4533 (ask for a planner) to review the location for compliance with applicable city ordinances and to issue a certificate of occupancy if needed.
 The fire marshal and the building division will conduct safety inspections before the occupation license can be issued.

Fee Schedule:

Occupation and/or Contractor License (See City Code §§ 18-12 and 18-13)	
If annual gross receipts Are between:	Annual Fee is:
<input type="checkbox"/> \$ 00 to \$100,000	<input type="checkbox"/> \$ 50
<input type="checkbox"/> \$ 100,001 to \$500,000	<input type="checkbox"/> \$ 150
<input type="checkbox"/> \$ 500,001 to \$1,000,000	<input type="checkbox"/> \$ 300
<input type="checkbox"/> \$ 1,000,001 to \$2,000,000	<input type="checkbox"/> \$ 450
<input type="checkbox"/> \$ 2,000,001 to \$3,000,000	<input type="checkbox"/> \$ 600
<input type="checkbox"/> \$ 3,000,001 to \$5,000,000	<input type="checkbox"/> \$ 750
<input type="checkbox"/> \$ 5,000,001 and over	<input type="checkbox"/> \$ 1,200

Craftsman License (See City Code § 6-6)		
<input type="checkbox"/> Check here if applying for craftsman license only		
Craftsman License	Initial Fee	Renewal Fee
One License	<input type="checkbox"/> \$ 90	<input type="checkbox"/> \$ 60
Two Licenses	<input type="checkbox"/> \$ 155	<input type="checkbox"/> \$ 90
Three Licenses	<input type="checkbox"/> \$ 185	<input type="checkbox"/> \$ 110

Insurance/Real Estate Brokers & Agents (City Code §§ 18-12 and 18-14)	
If annual gross receipts Are between:	Annual Fee is:
<input type="checkbox"/> \$ 0 to \$25,000	<input type="checkbox"/> \$ 50
<input type="checkbox"/> \$ 25,001 to \$50,000	<input type="checkbox"/> \$ 160
<input type="checkbox"/> \$ 50,001 to \$100,000	<input type="checkbox"/> \$ 320
<input type="checkbox"/> \$ 100,001 and over	<input type="checkbox"/> \$ 482

Short Term Event Application

DAILY Fee of \$16 PER DAY x # _____ of days = \$ _____