



Fire Department 200 Second Street Kennett, Missouri 63857
Phone : 573 - 888 - 3005 Fax : 573 - 888 - 0224
Email : secretary@kennettfd.org

NOTICE TO MERCHANTS AND / OR TRADESMEN

Enclosed are two ways to apply for Merchant or Contractor License for the City of Kennett, You may fill out a paper application or our new online application. All licenses with the city will expire on June 30th. Complete one of the application forms in its entirety and if you fill it out on paper return to this office (address above) or email (email address above.)

- **Businesses that make retail sales** provide a copy of No tax due with your application.
- **Businesses that provide non-taxable service** shall only send in your application.
- **Liquor license applicants** must provide a copy of state liquor license, no tax due
 - We understand that it takes a little longer for state licenses to be renewed. Please get that information to us as soon as possible.
- **Contractors** will need to provide proof of liability insurance in the amount of \$100,000.00 with the City of Kennett shown as certificate holder.

IF YOU DO NOT OBTAIN YOUR MERCHANT LICENSE BY THE EXPIRATION DATE YOU COULD BE ISSUED A CITATION FOR NON-COMPLIANCE. THIS CITATION WILL REQUIRE A COURT DATE AND POSSIBLE FINE.

This will be the only notice sent.

There will not be a fee for your license unless you apply for one of the following:

Dance-\$300.00; Fireworks-\$50.00; Liquor (Monday - Saturday pkg)-\$150.00; Liquor Sunday Sales (for Original Package and By the Drink) - \$300.00; Liquor Tasting-\$25.00; Liquor (By The Drink Monday-Saturday)-\$450.00; Cigarette/Tobacco-\$5.00

All checks should be made payable to the City of Kennett. Please mail or deliver to the address above.

Thank you for your cooperation

Leslie Jones
Code Enforcement Secretary
Fire Department Secretary

**APPLICATION FOR MERCHANTS LICENSE
CITY OF KENNETT, MISSOURI**

NAME OF BUSINESS : _____
 BUSINESS ADDRESS: _____ PHONE # _____
 CITY, STATE, ZIP: _____
 MANAGER: _____ PHONE # _____
 (PLEASE NOTIFY THE SECRETARY WHEN THERE IS A CHANGE IN MANAGERS)
 OWNER: _____ PHONE # _____
 EMAIL ADDRESS: _____
 MAILING ADDRESS : _____
 CITY, STATE, ZIP: _____
 EMERGENCY NAME : _____ PHONE # _____
 NATURE OF BUSINESS: _____

PLEASE CHECK WHAT LICENSE TYPE YOU ARE APPLYING FOR TO THE LEFT OF THE COLLOM

<input type="checkbox"/>	Dance-\$300.00	<input type="checkbox"/>	Liquor Tasting - \$25.00
<input type="checkbox"/>	Fireworks - \$50.00	<input type="checkbox"/>	Liquor (by the drink Mon-Sat) - \$450
<input type="checkbox"/>	Liquor (Mon - Sat pkg) - \$150.00	<input type="checkbox"/>	Cigarette / Tobacco - \$5.00
<input type="checkbox"/>	Liquor Sun. Sales (pkg & by the drink) - \$300.00	<input type="checkbox"/>	Merchant License - \$0.00
<input type="checkbox"/>	Contractor - \$0.00		

- NUMBER OF EMPLOYEES: _____

ARE YOU REQUIRED TO COVER YOUR LIABILITY WITH WORKERS COMPENSATION COVERAGE UNDER CHAPTER 287. RSMO? _____

NEW: RENEWAL:

MO. SALES TAX ID: _____

STATEMENT OF APPLICANT:

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND THAT I AUTHORIZE AN INVESTIGATION TO BE CONDUCTED BY THE CITY OF KENNETT, MISSOURI AS NECESSARY FOR DETERMINING MY ELIGIBILITY FOR ISSUANCE OF A BUSINESS / MERCHANTS LICENSE. I AM AWARE THAT WILLFULLY MAKING A FALSE STATEMENT OR CONCEALING A MATERIAL FACT CAN BE THE BASIS FOR REJECT OF A BUSINESS / MERCHANTS LICENSE.

SIGNATURE OF APPLICANT: _____

DATE: _____