

**VILLAGE OF PARKWAY
BUSINESS LICENSE APPLICATION**

NAME OF BUSINESS: _____

Owner of Business: _____

Address: _____

Contact Person: _____ **Phone:** _____

EMPLOYER TAX ID# _____

SALES TAX NUMBER _____

TYPE OF BUSINESS _____

Is this a non-profit business? _____

Does your business have liquor sales? _____

Owner of the property the business is located at, if the space is rented

Property Owner _____

Property Owner Address _____

Property Owner Phone Number _____

**Contractor's must provide proof of liability insurance and workers compensation coverage.
Please sign on the appropriate signature line.**

Signature: _____ I have worker's compensation insurance: RSMO
287.030

Signature: _____ I am not required to provide coverage: RSMO
287.090

It is unlawful, pursuant to RSMO Section 287.128, for any applicant to provide fraudulent information.

Any retail business charging sales tax must submit a NO Tax Due Statement from the Missouri Department of Revenue.

Applicant agrees to comply with all applicable codes and ordinances of the Village of Parkway.

Applicant understands that the issuance of any business or merchant licenses creates no legal liability, expressed or implied, on the Village of Parkway.

Applicant certifies the information submitted is accurate.

Full payment of fees is required prior to processing the application, and checks should be made payable to the Village of Parkway.

FEES:

Merchant License	\$25.00
Liquor Sales License	\$50.00

Signature of Business Owner/Manager: _____ **Date:** _____

Please fill out and enclose appropriate merchant fees with your application and return to
Village of Parkway
1361 Parkway Drive
St. Clair, MO 63077

If you need any assistance, please contact Lynnette Busse at 636-629-9961.