2021 Business License Application City of New Bloomfield PO Box 77 · 501 Glenwood Drive New Bloomfield, Missouri 65063 (573) 491-3614
1. Name of Business:    Phone Number:
2. Physical Address:
3. Mailing Address:
4. Nature of Business: Email:
5. Manager: Manager's Telephone Number:
6. Name and Address of Owner or Corporate Office:
Owner's Telephone #:
7. Tax ID Number or Owner's SSN:Owner's Date of Birth:/
8. Number of Employees excluding owner:Workers Comp. Required: DYes No /Attached: Yes No
<ul> <li>9. License History: Has Applicant, Owner, or Manager have ever had a business license suspended or revoked in Missouri or any other state? Yes No If yes: a) State of Revocation:</li> <li>b) Date of Susp/Revoc: c) Period of Susp/Revoc: d) Put explanation on reverse of this form 10. Sales Tax License No.: If applicant has a sales tax license number, applicant must attach tax clearance letter from the Missouri Department of Revenue showing that owner/manager is not indebted to the City of</li> </ul>
New Bloomfield or Missouri for any tax, including sales tax. MODOR's telephone number is: (573)751-4450 Letter Attached: Yes No
11. Notice to applicant: All licenses expire December 31 <sup>st</sup> each calendar year and are not transferable to any other person or entity.
<ul> <li>12. The undersigned applicant certifies that the information contained in this application is accurate and complete. The applicant understands that from the date the application is received by the City Clerk, the applicant has 10 days to submit all required paperwork and \$25.00 or the license may be denied, the application fee forfeited, and the applicant will have to reapply for a business license. Print Name and Title:</li> <li>13. Date: Applicant Signature &amp; Title:</li> </ul>
FOR USE BY CITY OF NEW BLOOMFIELD ONLY:
Application Determination: Approved or Denied:
City Clerk Signature: Date :
If approved, was application: A Mailed or A Hand Delivered on Date:
Amount Paid         Date Paid:         Check # / MO #:         Cash Receipt #: