

Office Use Only Approved by _____

Fee \$ _

Business License # BL / BR _

City of Belton, Missouri

506 Main Street – Belton, MO 64012 P 816.331.4331 • F 816.322.4620

Ice Cream Vendor License Application (please type or print)

Reminder – A business may **NOT** operate until a business license is approved. Please allow 3-5 days for license processing.

Fees

License Year 2020-21

• License fee \$25

License fees are not prorated. City licenses expire June 30 of each year.

Cigarette License # BL / BR ___

Fee \$ _

5/2020



Business	<u>Information</u>							
Business Name			DBA Name (if different)					
Full Stree	et Address (No PO Bo	xes)			Number			
Full Mailing Address (if different)				City/St/Zip City/St/Zip	Business Phone Number	(not counting owners)		
Email			Descriptio		siness <u>Ice Cream Vend</u>	or / Ice Cream Truck		
			·					
Description	n of Vehicle to be use	ed Make / Model / Year / Col	lor Once a business lice	nse has been issued, it is	cle license plate# and Sta is the obligation of the business y of Belton. (Belton Code of On	to inform the city of any		
Yes / No	No Does this business do retail sales within the City limits of Belton? If yes, attach a Certificate of No Tax Due from MoDOR dated within the past 90 days showing the City of Belton. Retail Sales Tax #							
Yes / No	Is this business a nonprofit? If yes, for <u>New Applications Only</u> , attach IRS form showing status. Nonprofits are exempt from license fee.							
Yes / No	Is this business producing or distributing food? If yes, for New Applications Only, attach a Cass County health permit or exemption letter.							
Ownersh	ip Information	Sole Proprietor (complete section A)	Partnership (complete section B)	Corporation / (complete section C				
Section A – Sole Proprietor A single-member LLC should fill out section C								
Owner's N	Name		_ Home Address _ (if different than ab			City/St/Zip		
Cell phon	ne	Email			# or SS#			
Yes / No	Is the owner a U.	S. citizen? If no, please	e provide employment au	thorization documen	nt			
Yes / No Have you ever been convicted (found guilty) in any court in the U.S. for any offenses for which you served time, received a sentence (even suspended), were placed on probation, or paid a fine? This includes all traffic tickets and arrests. This does not include minor traffic violations. If yes, please provide approximate date, charge, and location/jurisdiction of each.								
☐ New A	pplications Only, attacl	n the owner's valid U.S. d	river's license or U.S. pa	ssport.				
☐ If the owner lives inside Belton city limits, attach the previous year's personal property tax receipt <u>OR</u> a letter of non-assessment from Cass County.								
Section B	B – Partnership	A limited partnership	(LP) should fill out section	on C				
#1 Owner	's Name	•						
		Email	(if different than ab	ove)	# or SS#	City/St/Zip		
Yes / No								
Yes / No Is the owner a U.S. citizen? If no, please provide employment authorization document								
☐ New A	pplications Only, attacl	n owner #1's valid U.S. dı	river's license or U.S. pas	sport.				
☐ If owner #1 lives inside Belton city limits, attach the previous year's personal property tax receipt <u>OR</u> a letter of non-assessment from Cass County.								
* * * * * * * * * * * * * * * * * * *								

TIF?_

_ / Exempt

Section B – Partnership (cont.)							
#2 Owner's Name		me Address					
		ifferent than above)	City/St/Zip				
_		EIN# or SS#					
Yes / No Is the owner a U.S. cit	Yes / No Is the owner a U.S. citizen? If no, please provide employment authorization document						
sentence (even suspended), were place	ced on probation, or paid a	y court in the U.S. for any offenses for which fine? This includes all traffic tickets and arreste, and location/jurisdiction of each.	sts. This does not include minor				
New Applications Only, attach own	er #2's valid U.S. driver's lice	ense or U.S. passport.					
☐ If owner #2 lives inside Belton city l	mits, attach the previous year'	's personal property tax receipt OR a letter of non-a	assessment from Cass County.				
Section C – Corporation or LLC EIN#	-	New Applications Only, attach a Certificate of Go Secretary of State (Inc.) or a Certificate of Authority					
Please list principal officers/membershowing officers/members/positions.	s (e.g., President, VP, Secre	etary) OR you may attach your Missouri Secr	etary of State Registration form				
1. Name							
Yes / No Have you ever been conv sentence (even suspended), were place	ricted (found guilty) in any ced on probation, or paid a	court in the U.S. for any offenses for which y fine? This includes all traffic tickets and arrespe, and location/jurisdiction of each.	sts. This does not include minor				
2. Name							
sentence (even suspended), were place	ced on probation, or paid a	court in the U.S. for any offenses for which y fine? This includes all traffic tickets and arre- ge, and location/jurisdiction of each.	sts. This does not include minor				
3. Name	Position						
sentence (even suspended), were place	ced on probation, or paid a	court in the U.S. for any offenses for which y fine? This includes all traffic tickets and arreste, and location/jurisdiction of each.	sts. This does not include minor				
sentence (even suspended), were place	ricted (found guilty) in any ced on probation, or paid a	court in the U.S. for any offenses for which y fine? This includes all traffic tickets and arreste, and location/jurisdiction of each.	sts. This does not include minor				
**Name of local emergency contact	(KC Metro area) for a busing	ness physically located in Belton					
Cell Phone							
Additional Information for AT							
Yes / No Do you or your corporate		ness in another location? If yes, please provid	e location information.				
Yes / No Have you or your corpor	ate business entity ever had	l a business license revoked, suspended, or de	enied? If yes, please explain.				
Yes / No Are you or any of your corp	oorate business entity officer	rs currently under investigation or have outstandi	ng warrants? If yes, please explain.				
described in this application does no the license for which I am applying of of Belton. I hereby state the informa agents, and employees to seek infor acknowledge that this is only an appl	t employ any illegal aliens loes not violate or otherwis tion contained herein is tru mation and conduct an inv ication and is not approval	citizen or I am legally authorized to work in I certify the business or occupation I intend the conflict with existing laws of the State of Mark, correct, and complete to the best of my knowstigation into the truth of the statements of the statements are for me to operate a business within the City of the statement of the state	to pursue under the authority of dissouri or ordinances of the City nowledge. I authorize the city, its et forth in the application. I also				
Please note: this application must b	e <u>fully completed</u> & <u>legible</u>	<u>e</u> before it will be processed.					
Signature of Owner or Agent	Printed Name	Position	Date				