

CITY OF LADUE NEW RETAIL BUSINESS LICENSE APPLICATION

Retail busin	esses must submit the following items:
	This application, Signed and Complete
	License Tax Payment
	Copy of Missouri Retail Sales License (issued by State of Missouri)
	 If Food Service Business: Proof of recent inspection with St. Louis County Department of Health
BUSINESS INFORMA	TION
Business Name:	
Address:	<u> </u>
Phone:	Email:
	NFORMATION FOR RENEWAL NOTICES (If different from above)
Mailing Address:	
Phone:	Email:
Business Descrip	tion: Number of Employees:
MO Tax ID:	Ladue Alarm Permit#
Property: ☐ Own	ed 🗆 Rented Owner Contact Info:
LICENSE TA	X DUE — MINIMUM FEE \$100
	Estimated Gross Receipts for First Year of Business:
License Fee	: \$1.00 for every \$1,000 (divide gross receipts by 1,000)
	TOTAL PAYMENT DUE:
	REMIT TO: CITY OF LADUE Attn: Licensing 9345 Clayton Rd. St. Louis, MO 63124
	or Email to: licensing@cityofladue-mo.gov
,	Visit our website www.cityofladue-mo.gov/business for more information and online forms.
	representative of the above business, I do hereby declare that the information contained in this Tax During gross receipt sales reporting, is correct per sections 50-16 thru 50-53 of the City of Ladue code.
Signature:	Title:
Print Name:	