

CITY OF PLATTE WOODS

6750 NW Tower Drive, Platte Woods, MO 64151
(816) 741-6688 • cityclerk@cityofplattewoods.org

2026 OCCUPATION/BUSINESS LICENSE APPLICATION

NAME OF BUSINESS _____

BUSINESS ADDRESS _____ **SUITE(S)** _____

PHONE _____ **MISSOURI SALES TAX NUMBER** _____

EMAIL _____

DESCRIPTION OF YOUR BUSINESS _____

OWNER OR PRINCIPAL NAME _____

HOME ADDRESS _____
Street, City, State, ZIP

CELL PHONE _____ **DATE OF BIRTH** _____ **SSN** _____
(If more than one owner/principal, attach additional sheets)

ADDITIONAL EMERGENCY CONTACTS
(1) Name _____ Phone _____
(2) Name _____ Phone _____

ADDITIONAL OWNER OR PRINCIPAL NAME _____

HOME ADDRESS _____
Street, City, State, ZIP

PHONE _____ **DATE OF BIRTH** _____ **SSN** _____

CERTIFICATE OF NO TAX DUE *Compliance with RSMo Sec. 144 is required before license is issued.*

☐ PLEASE PROVIDE COPY OF FORM WITH APPLICATION.

WORKER'S COMPENSATION *Compliance with RSMo Sec. 287 is required before license is issued.*

CHECK ONE: ☐ Certificate of Insurance is attached.

☐ By signature below, I certify that this business is exempt under RSMo Sec. 287.

NAME OF APPLICANT *(Please print)* _____

SIGNATURE _____ **TITLE** _____ **DATE** _____

VIDEO/ALARM SYSTEM REGISTRATION

Description of Video/Alarm System _____

Monitored By _____

Individual/Company

Street Address

City, State, ZIP

(Area Code) Phone Number

Check Applicable Alarms: ☐ Horn ☐ Siren ☐ Lights ☐ Silent ☐ Cameras/ Qty _____

Alarm shuts off in _____ minutes. (Maximum time allowed is 30 minutes.) Video Backed Up _____

Does business utilize a video doorbell system? ☐ Yes ☐ No

EMERGENCY CONTACTS: A responsible person must respond to all alarms. List persons who will respond to calls, have keys, and reset the alarm.

Name _____ Phone(s) _____

VEHICLES PARKED AT YOUR BUSINESS

MAKE	MODEL	COLOR	LICENSE PLATE #
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ANNUAL FEES

Occupation License \$40-\$200 *City Code Section 605.030*

Liquor License \$120-200 *RSMo Chapters 311- 312 and City Code Section 605.030*

Coin Operated Amusement Devices _____ Machines @ \$25.00 each

APPROVAL _____ New Business _____

City Council _____

Date _____