CITY OF LAKE OZARK - OCCUPATIONAL LICENSE APPLICATION

License #:

573.365.5378 | FAX 573.365.4515 3162 BAGNELL DAM BLVD., LAKE OZARK, MO 65049 | P.O. BOX 370

All responses are required. Please complete all fields.

Business Details

<u> </u>		
Business Name		
Owner(s) Name		
Type of Business (Retail Cloth	ing,	
Food/Beverage, Arcade, etc.)		
Operating Hours		
Business Physical Address		
Business Email		
Business Phone		
Mailing Address		
Emergency/Night Contact (If o	different than above)	
Night Contact Name	V/O	
Night Contact Number		
Ownership Status - [] Individ	ual [] Partnership	[] Corporation
Corporate Name		
Corporate Address		
Corporate Phone Number		
State and Property Information		
Missouri Sales Tax Number (Attach (Сору)	
Property Owner Name		
Property Owner Address		
Property Owner Phone		
		wing authorization to operate at this location
(e.g., lease agreement, letter of conse	ent, etc.)	
Number of Employees - []	1-5 []6-15 []16-49 []50-9	9 []100+
Date	Name of Preparer	Signature of Preparer
Current on sales/property taxes	City Staff Will Complete s - (City Clerk)	
	(City Collector)	
Updated FOG Inspection (if nee		rks Director)
·	(City Inspector)	
•		