

APPLICATION
MERCHANT'S LICENSE
CHRISTIAN COUNTY, MISSOURI

LICENSE YEAR JANUARY 1 THROUGH DECEMBER 31
PLEASE TYPE OR PRINT

INFORMATION REGARDING BUSINESS:

LEGAL NAME OF BUSINESS _____

NAME OF BUSINESS IN CHRISTIAN COUNTY _____

OWNER'S NAME _____

TELEPHONE FOR BUSINESS (____) _____ DATE OPENED _____

MAILING ADDRESS FOR BUSINESS _____
(PO BOX or STREET) (CITY) (ZIP)

BUSINESS LOCATION ADDRESS _____
(STREET) (CITY) (ZIP)

TELEPHONE NUMBER FOR OWNER (____) _____

MISSOURI STATE SALES TAX NUMBER (8 DIGITS) _____

NATURE OF BUSINESS _____
(RETAIL CLOTHING, RESTAURANT, ETC)

INFORMATION REGARDING APPLICANT:

APPLICANT IS: _____ OWNER _____ MANAGER _____ AGENT

LEGAL NAME OF APPLICANT _____
(PLEASE PRINT)

SIGNATURE OF APPLICANT DATE

ATTACH CHECK IN THE AMOUNT OF \$25.00, MADE PAYABLE TO TED NICHOLS, COLLECTOR AND RETURN TO 100 WEST CHURCH, ROOM 101, OZARK, MO 65721

YOU ARE REQUIRED BY MISSOURI LAW 150.100 RSMO, TO HAVE A COUNTY MERCHANT'S LICENSE IF YOU CONDUCT WHOLESALE, RETAIL OR MANUFACTURE WITHIN THE COUNTY. YOU MAY ALSO NEED A CITY BUSINESS LICENSE. PLEASE CONTACT THE CITY HALL OF THE CITY YOU WILL BE DOING BUSINESS IN.

* IF YOU HAVE ANY QUESTION OR NEED ADDITIONAL INFORMATION PLEASE CONTACT OUR OFFICE.

TED NICHOLS, COLLECTOR OF REVENUE
CHRISTIAN COUNTY, MISSOURI
100 WEST CHURCH, ROOM 101
OZARK, MO 65721
(417) 581-2334