

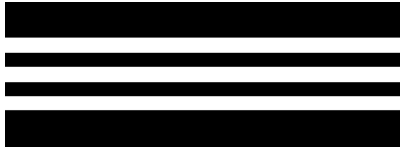
BUSINESS LICENSE APPLICATION

Miscellaneous Business

City of Kansas City, Missouri
Revenue Division

Phone

(816) 513-1135



RD-102
(Rev 09/10)

Period From:

Period To:

Legal Name:

FEIN/SSN:

Mailing Address:

Account ID:

DBA Name:

SIC Code:

Business Address:

Missouri Sales Tax No.

For changes to name, address or FEIN/SSN, please contact us at revenue@kcmo.org or (816) 513-1135.

BUSINESS LICENSE EXPIRES DECEMBER 31 OF EACH YEAR.
TO AVOID PENALTY PAY BEFORE MARCH 1.

Table Number (see instructions) _____

- 1. Gross annual receipts for prior calendar year
- 2. Annual fee due (from table)
- 3. Credit for prior year overpayment (if applicable)
- 4. Total fee due (line 2 minus line 3)
- 5. Penalty: 10% of line 4, if paid on or after March 1, plus 2% per month for subsequent months (maximum penalty is 30%)
- 6. Total amount due (sum of lines 4 and 5)
- 7. Amount paid
- 8. X box if amended return (see instructions)

	DOLLARS					CENTS		
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								

ATTACH ALL REQUIRED CLEARANCES

For office use only: "X" if Workers' Comp clearance attached

Make check payable to CITY TREASURER. DO NOT SEND CASH Mail to PO Box 801102 Kansas City, MO 64180-1102

Under penalties of perjury, I declare this return to be a true, correct, and complete accounting for the taxable year stated.

I authorize the Commissioner of Revenue or delegate to discuss my return and attachments with my preparer.

Yes

No

Taxpayer Signature

Print Name

Title

Date

Phone

Preparer's Signature (if other than taxpayer)

Print Name

Title

Date

Phone

35539



PRIOR YEAR BUSINESS LICENSE

ADJUSTED RETURN

City of Kansas City, Missouri
Revenue Division

Phone
(816) 513-1135

RD-104
(Rev 09/10)

Period From:

Period To:

Legal Name

FEIN/SSN:

Mailing Address

Account ID:

DBA Name

SIC Code:

Business Address

For changes to name, address or FEIN/SSN, please contact us at revenue@kcmo.org or (816) 513-1135.

To ensure proper crediting, please enclose a separate check for the RD-104.

Missouri Sales Tax No. _____

GROSS ANNUAL RECEIPTS FOR PRIOR CALENDAR YEAR										ANNUAL FEE DUE																				
DOLLARS					CENTS					(from table A of instructions)					DOLLARS					CENTS										
1. RETAIL/ WHOLESALE/ SERVICE:	1a.																			1b.										
2. MANUFACTURER:	2a.																			2b.										
3. CONSTRUCTION/ REMODELING:	3a.																			3b.										
4. MISCELLANEOUS:	4a.																			4b.										
5. Annual fee (sum of lines 1b, 2b, 3b, and 4b)	5.																			5.										
6. Credit applied to annual fee due on line 5 Fee paid in prior calendar year _____	6.																													
6a. Annual fee subtotal (line 5 minus line 6) _____	6a.																													
7. Penalty: 10% of line 6a, if paid on or after March 1, plus 2% per month for subsequent months (maximum penalty is 30%)	7.																			7.										
8. Total amount due (line 6a plus line 7), if negative enter zero	8.																			8.										
9. If overpaid (line 6 is greater than line 5), amount of REFUND requested (if filed timely)	9.																			9.										
10. If overpaid (line 6 is greater than line 5), amount of CREDIT requested (if filed timely)	10.																			10.										
11. Amount paid	11.																			11.										
12. Date if closed	12.	M	M	/	D	D	/	Y	Y																					

Make check payable to: CITY TREASURER. DO NOT SEND CASH Mail to Revenue Division, P.O. Box 803104 Kansas City, MO 64180-3104
Under penalties of perjury, I declare this return to be a true, correct, and complete accounting for the taxable year stated.
I authorize the Commissioner of Revenue or delegate to discuss my return and attachments with my preparer. Yes No

_____ Taxpayer Signature	_____ Print Name	_____ Title	_____ Date	_____ Phone
_____ Preparer's Signature (if other than taxpayer)	_____ Print Name	_____ Title	_____ Date	_____ Phone



Instructions for Filing Business License Application-Miscellaneous Business (Form RD-102) and Prior Year Adjusted Return (Form RD-104)

RD-102/104A
(Rev 09/10)

Phone (816) 513-1135 Fax (816) 513-1264

Miscellaneous businesses are required to complete form RD-102 for the current year and, if applicable, form RD-104 for the previous year to obtain a business license. The license fee for new businesses is based upon estimated gross receipts. Existing businesses will use the previous year's gross receipts to determine the current year's fee. Form RD-104 should be used to report actual gross receipts for the previous year. To avoid delays in processing, use forms provided or forms approved by the Revenue Division of the City of Kansas City, Missouri.

General Instructions

- If you need changes or corrections made to the forms sent to you, please contact the Business License Section at (816) 513-1135. The following information must be entered on both forms:
 - Taxable period (calendar year only)
 - SIC Code (if known)
 - Business name and location
 - Table number used (form RD-102)
 - FEIN/SSN
 - Missouri Sales Tax Number (required for retail sales)
 - Mailing address
- All businesses located in Kansas City, Missouri must obtain a Zoning Clearance prior to the issuance of a business license. A change in address or relocation within Kansas City, Missouri city limits requires the issuance of a new zoning clearance prior to issuance of a business license. All required clearances must be attached to the Business License Application. For information on zoning requirements, contact the Development Services, Permit Division, 5th floor, City Hall, (816) 513-1500. Other clearances may be required.
- The following may delay issuance of your business license:
 - Failure to furnish required information
 - Calculation error
 - Failure to attach proper clearances
 - Failure to pay other city taxes
 - Failure to use forms approved by the Revenue Division
 - Underpayment of amount due (i.e., failure to include penalty)
 - Not filing both forms (RD-102 and RD-104, if applicable)
 - Failure to provide no tax due letter from STATE of MISSOURI (if applicable)
 - Changes made to RD-101 or RD-104
- When and where to file:

Both Forms RD-102 and RD-104 are due prior to March 1 of each year for businesses operating in any portion of both the current and prior years. New or first time Kansas City, Missouri Business License purchasers must only file the RD-102 prior to operation. Additionally, a new/first time Business License purchaser must complete and submit a Registration Application form RD-100 with the RD-102. Tax returns may be filed in person with the Kansas City's Business Customer Service Center, 1118 Oak Street, Kansas City, Missouri.

Mail completed ****RD-102**** return and a separate check to Revenue Division, P.O. Box 801102, Kansas City, MO 64180-1102.
Mail completed ****RD-104**** return and a separate check to Revenue Division, P.O. Box 803104, Kansas City, MO 64180-3104.
- Penalty provisions:
 - A late charge of 10% of the amount due shall apply on March 1 of the current year and 2% of the original fee shall apply the first of each month thereafter (maximum 30%) until paid in full. New businesses, which have not filed are subject to the 10% penalty on the 61st day of business and to the additional 2% penalty the first of each month thereafter.
 - A statement of gross receipts on preliminary license application resulting in payment of less than 80% of the actual amount due, unless equal to or exceeding the gross receipts for the preceding year, will result in interest charges of 8% of the deficiency. These charges will be added to the annual license fee and are computed from the date of payment of the preliminary license fee to the date of payment of the annual fee.

Form RD-104 Instructions-Prior Year Adjusted Return

- Lines 1, 2 and 3. Leave blank.
- Line 4a. Enter actual gross receipts for the previous calendar year.
- Line 4b. Calculate annual fee due using appropriate table and enter amount on line 4b.
- Line 5. Enter annual fee due from line 4b.
- Line 6. Enter amount of fee paid for the previous year's business license with adjustment or credit (Excluding any interest and penalties).
- Line 6a. Calculate annual fee subtotal (line 5 minus line 6).
- Line 7. If filed after March 1 of the current year, calculate penalty and enter amount due. (fee from Line 6a)
- Line 8. Calculate total amount due, then enter (if negative enter zero).
- Lines 9 and 10. If line 6 is greater than line 5, enter amount of credit or refund.
- Line 11. Enter amount paid.

Line 12. Enter date if closed.

Form RD-102 Instructions-Miscellaneous Business License Application

- Line 1. Enter gross receipts for the previous calendar year (from line 4a form RD-104).
If not in business the full year or a new business, enter estimated gross receipts (see 5b on reverse side).
- Line 2. Enter annual fee using appropriate table (on back of form RD-102).
- Line 3. Enter amount of credit for prior year overpayment (from line 10 form RD-104).
- Line 4. Enter total fee due (line 2 minus line 3).
- Line 5. After March 1 calculate penalty and enter amount due.
- Line 6. Enter total amount due (sum of lines 4 and 5).
- Line 7. Enter amount paid.
- Line 8. Check if this corrects a previously submitted application.

ATTACH ALL REQUIRED CLEARANCES

To determine fee due:

For SIC Code entered on form RD-102, locate corresponding table number listed below (enter the table number used on form RD-102). Go to the specified fee table, determine the fee due, then enter the fee on line 2 (form RD-102) or line 4b (form RD-104).

Code Table

SIC Code	Table Number
20110	133
20410	130
20481	131
42210	63
50120	129
50460	76
51470	133
51481	46
51941	50
55110	129
55992	76
59994	108
62210	132
67990	128

Visit our website at www.kcmo.org/revenue for more forms and instructions

RD-102 FEE TABLES

TABLE 46, GROSS ANNUAL SALES		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	200,000	70
200,001	300,000	110
300,001	400,000	150
400,001	500,000	190
500,001	600,000	230
600,001	900,000	270
900,001	1,800,000	470
1,800,001	3,000,000	750
3,000,001	5,000,000	1,050
5,000,001	NONE	1,500

TABLE 50, GROSS ANNUAL SALES		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	600,000	175
600,001	750,000	225
750,001	1,250,000	300
1,250,001	2,000,000	475
2,000,001	2,750,000	650
2,750,001	3,500,000	825
3,500,001	5,000,000	1,050
5,000,001	NONE	1,500

TABLE 63, BUSHELS CAPACITY		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	750,000	160
750,001	1,000,000	213
1,000,001	2,000,000	422
2,000,001	3,000,000	628
3,000,001	4,000,000	835
4,000,001	5,000,000	1039
5,000,001	6,000,000	1243
6,000,001	7,000,000	1447
7,000,001	8,000,000	1649
8,000,001	9,000,000	1851
9,000,001	10,000,000	2052
10,000,001	NONE	2253

TABLE 76, GROSS ANNUAL BUSINESS		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	50,000	45
50,001	100,000	90
100,001	200,000	180
200,001	300,000	270
300,001	500,000	450
500,001	750,000	675
750,001	1,000,000	900
1,000,001	1,500,000	1,275
1,500,001	2,000,000	1,750
2,000,001	3,000,000	2,250
3,000,001	NONE	2,500

TABLE 108, GROSS ANNUAL SALES		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	100,000	90
100,001	300,000	180
300,001	600,000	360
600,001	900,000	540
900,001	1,200,000	720
1,200,001	1,600,000	910
1,600,001	2,000,000	1,100
2,000,001	2,500,000	1,285
2,500,001	3,000,000	1,500
3,000,001	3,500,000	1,730
3,500,001	4,500,000	1,965
4,500,001	5,000,000	2,200
5,000,001	NONE	2,500

TABLE 128, GROSS ANNUAL BUSINESS		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	250,000	200
250,001	500,000	400
500,001	1,000,000	600
1,000,001	2,000,000	800
2,000,001	3,000,000	1,000
3,000,001	4,000,000	1,250
4,000,001	5,250,000	1,500
5,250,001	7,500,000	1,750
7,500,001	10,000,000	2,000
10,000,001	12,500,000	2,250
12,500,001	NONE	2,500

TABLE 129, GROSS ANNUAL BUSINESS		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	28,000	35
28,001	100,000	70
100,001	250,000	140
250,001	500,000	280
500,001	1,000,000	560
1,000,001	3,500,000	1,120
3,500,001	6,000,000	2,230
6,000,001	8,500,000	3,340
8,500,001	11,000,000	4,450
11,000,001	13,500,000	5,560
13,500,001	16,000,000	6,670
16,000,001	18,500,000	7,780
18,500,001	21,000,000	8,890
21,000,001	NONE	10,000

TABLE 130, TONS OF PRODUCTION		
Multiply the number of tons by .024 (\$500 minimum)		

TABLE 132, GROSS ANNUAL BUSINESS		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	50,000	50
50,001	125,000	100
125,001	250,000	200
250,001	500,000	300
500,001	850,000	400
850,001	1,525,000	500
1,525,001	1,875,000	600
1,875,001	2,375,000	700
2,375,001	3,050,000	800
3,050,001	3,725,000	900
3,725,001	4,400,000	1,000
4,400,001	5,075,000	1,100
5,075,001	5,750,000	1,200
5,750,001	6,600,000	1,400
6,600,001	7,450,000	1,600
7,450,001	8,300,000	1,800
8,300,001	9,150,000	2,200
9,150,001	10,000,000	2,400
10,000,001	NONE	2,500

TABLE 133, GROSS ANNUAL BUSINESS		
LOW LIMIT	HIGH LIMIT	FEE DUE
0	600,000	200
600,001	750,000	300
750,001	1,250,000	450
1,250,001	2,000,000	650
2,000,001	2,750,000	825
2,750,001	3,500,000	1,000
3,500,001	5,000,000	1,500
5,000,001	NONE	2,000

TABLE 131, TONS OF PRODUCTION		
Multiply the number of tons by .0165 (\$500 minimum)		

REGISTRATION APPLICATION

RD-100

REV. 09/10

CITY OF KANSAS CITY, MISSOURI
 FINANCE DEPARTMENT
 REVENUE DIVISION
 1118 OAK STREET
 KANSAS CITY, MO 64106-2786

(816) 513-1135 (Telephone)
 (816) 513-1264 (Fax)

REASON FOR SUBMITTING REGISTRATION FORM (check all that apply).

<input type="checkbox"/> Business License Account	<input type="checkbox"/> C & T - Hotel Account <input type="checkbox"/> Liquor Sales (Check if Applicable)	<input type="checkbox"/> Profits Account	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Cigarette License Account	<input type="checkbox"/> C & T - Food Account <input type="checkbox"/> Liquor Sales (Check if Applicable)	<input type="checkbox"/> Withholding Account	<input type="checkbox"/> Arena (Car Rental) <input type="checkbox"/> Arena (Hotel/Motel)

SOCIAL SECURITY / FEDERAL ID NUMBER	MISSOURI SALES TAX NUMBER
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INDIVIDUAL'S LEGAL NAME OR BUSINESS LEGAL NAME	BUSINESS NAME
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MAILING ADDRESS	City	State	Zip code
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LOCAL BUSINESS ADDRESS (IF ANY)	City	State	Zip code
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BUSINESS TELEPHONE NUMBER	LOCAL BUSINESS TELEPHONE	CONTACT NAME
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GENERAL INFORMATION

<p style="text-align: center;"><u>Type of Organization</u></p> <input type="checkbox"/> Corporation <input type="checkbox"/> Trust/Association <input type="checkbox"/> Individual/Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other, specify: _____	<p style="text-align: center;"><u>Type of Business</u></p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Retail Trade</td> <td><input type="checkbox"/> Finance</td> </tr> <tr> <td><input type="checkbox"/> Wholesale Trade</td> <td><input type="checkbox"/> Real Estate</td> </tr> <tr> <td><input type="checkbox"/> Manufacturing</td> <td><input type="checkbox"/> Service</td> </tr> <tr> <td><input type="checkbox"/> Construction</td> <td><input type="checkbox"/> Hotel/Motel</td> </tr> <tr> <td><input type="checkbox"/> Governmental</td> <td># of rooms: _____</td> </tr> <tr> <td><input type="checkbox"/> Restaurant</td> <td><input type="checkbox"/> Other, specify: _____</td> </tr> </table>	<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Finance	<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Real Estate	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Service	<input type="checkbox"/> Construction	<input type="checkbox"/> Hotel/Motel	<input type="checkbox"/> Governmental	# of rooms: _____	<input type="checkbox"/> Restaurant	<input type="checkbox"/> Other, specify: _____	<p style="text-align: center;"><u>Classification of Business</u></p> <input type="checkbox"/> Profit <input type="checkbox"/> Non-profit (If not-for-profit, attach copy of exemption certificate) <input type="checkbox"/> Voluntary Withholding Only (Nonresident employers)
<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Finance													
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Real Estate													
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Service													
<input type="checkbox"/> Construction	<input type="checkbox"/> Hotel/Motel													
<input type="checkbox"/> Governmental	# of rooms: _____													
<input type="checkbox"/> Restaurant	<input type="checkbox"/> Other, specify: _____													

DATE OF INCORPORATION (IF APPLICABLE)	STATE OF INCORPORATION (IF APPLICABLE)
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KCMO BUSINESS START DATE	FISCAL YEAR-END DATE	NUMBER OF EMPLOYEES LIVING OR WORKING IN KCMO
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DESCRIBE (IN DETAIL) THE NATURE OF BUSINESS PERFORMED IN KCMO _____

LIST ALL OWNERS, PARTNERS OR OFFICERS (Attach additional names on separate sheet):

Name	Home Address and Telephone Number	Position	Social Security Number

Under penalties of perjury, I declare this return (and accompanying documentation) to be true, correct and complete. I authorize the Commissioner of Revenue or delegate to discuss this tax return and accompanying documentation with my preparer YES NO

Signature of Taxpayer	Print Name	Date	Phone

City Resolution Number 070067 requests voluntary information regarding race, ethnicity, or gender in order to identify potential new businesses to participate in the City of Kansas City, Missouri Minority-Owned Business Enterprise (MBE) and Woman-Owned Business Enterprise (WBE) Program.

Please check this box if you are a minority-owned or woman-owned business

Visit our website at www.kcmo.org/revenue for more revenue forms and instructions

Business License and Registration

Businesses are required to be registered and licensed in order to do business in Kansas City, Missouri Unless State Law provides an exemption from licensing (to see the list click on Exemptions). New Businesses may be required to meet the following requirements, prior to the issuance of an occupational business license. Proof of obtaining the following documents should accompany the initial request for a license. In addition to licensing businesses, this section also registers businesses for other taxes the city collects.

Requirement	Office Location
FORM RD-100 REGISTRATION APPLICATION Required of all businesses operating in Kansas City, MO	KANSAS CITY, MO REVENUE DIVISION BUSINESS LICENSE SECTION 1118 Oak Street Kansas City, MO 64106 (816) 513-1135
ZONING CLEARANCE Required of all new and existing businesses with a change in a Kansas City, Missouri address	BizCare/KANSAS CITY, MO CITY PLANNING AND DEVELOPMENT DEPARTMENT 1118 Oak Street Kansas City, MO 64106 (816) 513-1500 or 816-513-BIZC(2492)
CERTIFICATE OF INCORPORATION/ORGANIZATION Required for limited liability companies, (LLC), corporations, limited partnerships, non-profit organizations Missouri Sales Tax Number (retail sales)	STATE OF MO – SECRETARY OF STATE 615 East 13th St., 1st Floor, Room 127 Kansas City, MO 64106 (816) 889-2944
FEDERAL EMPLOYERS ID NUMBER	INTERNAL REVENUE SERVICE (IRS) 1-800-829-4933
KCMO Regulated Industries CLEARANCE/APPROVAL Required for all establishments serving liquor and other types of businesses that are regulated by the City of KCMO. Examples are taxi and/or limousine companies, salvage dealers, etc....	KANSAS CITY, MO REGULATED INDUSTRIES CENTURY TOWERS 635 Woodland, Suite 2101 Kansas City, MO 64106 (816) 784-9000
HEALTH PERMIT Required of all food establishments	KANSAS CITY, MO HEALTH DEPT. 2400 Troost Ave., Suite 3000 Kansas City, MO 64108 (816) 513-6315
Worker’s Compensation Certificate of Insurance or Form MO-WC65B (Exemption) or Form MO-WC76 Certificate of Insurer Required of construction based companies	Applicant’s Insurance Company
KCMO Police Clearance (Required for all security guard service businesses & Private Investigators)	Private Officers Licensing Section 635 Woodland Ste 2104 Kansas City, MO 64106 816-899-6600

*Additional paperwork and/or requirements may be required depending on the type of business activity.