

**APPLICATION
MERCHANT'S LICENSE**

MONITEAU COUNTY, MISSOURI

Application is for year _____. License good from Jan. 1 through Dec. 31.
**Please print clearly.*

INFORMATION REGARDING BUSINESS:

MISSOURI STATE SALES TAX NUMBER (8 digits) _____ *(required)*

NAME OF BUSINESS IN MONITEAU COUNTY _____

BUSINESS LOCATION ADDRESS IN MONITEAU COUNTY:

_____ (Street) (City) (State) (Zip code)

MAILING ADDRESS FOR LICENSE RENEWAL: (If different than above)

_____ (Street) (City) (State) (Zip code)

PHONE # (For Moniteau Co. location) _____ DATE BUSINESS OPENED _____

NATURE OF BUSINESS (restaurant, retail clothing, etc.) _____

INFORMATION REGARDING APPLICANT:

APPLICANT IS: ___ OWNER ___ MANAGER ___ AGENT

APPLICANT'S NAME _____
(Please print) (last name) (first name) (middle initial)

EMAIL ADDRESS _____
(If available)

APPLICANT'S PHONE # _____

Signature of Applicant **Date**

*If applicant is representing a corporation or individual company, please provide the following:
Legal name of corporation or individual company _____

Address _____
(For above)

Phone # _____
(For above)

Attach payment (\$25 for Merchant's License, \$50 for Manufacturer's License), made payable to:
Ellen Ash, Collector, and return by Dec. 31 to: Moniteau County Collector
200 E. Main, California MO 65018