

CITY OF MOUND CITY

*205 East Sixth Street, PO Box 215
Mound City, MO 64470*

Merchant License due for 2014

Amount Due: \$15.00

Due by January 1, 2014

Name of Business: _____

Owner/Agent/Manager: _____

Physical Address: _____

Mailing Address: _____

Phone # _____

Sales Tax # _____

If any of the above information is incorrect or incomplete, please make the necessary changes.

All Businesses with a Missouri Retail Sales Tax Number must show a statement of "No Tax Due" before license will be issued or renewed.

I do not and will not knowingly employ a person who is an unauthorized alien in connection with the business for which the permit or license has been obtained.

Applicant Signature _____ Date _____

THIS FOR MUST BE RETURNED TO THE CITY COLLECTOR BEFORE YOU CAN RECEIVE YOUR MERCHANTS LICENSE

*City Clerk 660-442-3447
City Collector 660-442-3434*