

Application For Merchant's or Manufacturer's License

Account #

Missouri Sales Tax ID #

Complete and return along with a check or money order in the amount of \$25.00

To: Barton County Collector Room 101 1004 Gulf Street Lamar, MO 64759

If you have questions our telephone number is 417-682-5881 or fax is 417-682-4136

Business Phone: _____ Fax Number: _____ Owner's Phone: _____

As provided in Section 150.100 Revised Missouri Statutes 2008, I hereby make application to the Collector of Barton County, Missouri for a Merchant's or Manufacturer's License for a period of twelve months. I hereby certify that all goods, wares, and merchandise to be sold under this license are to be sold only at the address listed and that the merchandise is sold at:

Wholesale Retail Both Wholesale and Retail Service/No Sales

Further: I hereby certify that if applicable, the above business is in compliance with the regulations pertaining to this business as set out in the Workman's Compensation laws of the State of Missouri.

Signed: _____ Print Name: _____

Location Address

Business Name:

Business Address:

City, State, Zip:

Mailing Address

Name:

Address:

City, State, Zip:

Owner's Address

Owner's Name:

Owner's Address:

City, State, Zip: