



Application for or Renewal of City Business License

City of Russellville, Missouri

Business Licenses are required in accordance with

City of Russellville Code Chapter 600

GENERAL BUSINESS ONLY – NOT LIQUOR

Name of Company: _____

*Please Circle one: (Individual) (Partnership) (Corporation) (LLC)

Business Address: _____
STREET _____ CITY/STATE _____ ZIP _____

Billing Address: _____
STREET _____ CITY/STATE _____ ZIP _____

Business Phone and/or Cell Phone number: _____

Name of Owner of Business: _____

Address of Owner: _____

Home Phone and/or Cell Phone number: _____

Manager Name & Number (if applicable): _____

Tax I.D. No. or SSN: _____ Driver's License #/State: _____
Copy of Department of Revenue Sales Tax Certificate (required)

Type of work, sales or service: _____
If selling food (not pre-packaged), copy of Cole County Public Health Department Certificate is required

Bonded? _____ if yes, with whom: _____

Insured? _____ if yes, with whom: _____

Work Comp Insurance? _____ if yes, with whom: _____

Signature (Owner): _____ Date: _____

City of Russellville

Physical Address: 13203 Railroad Avenue

Mailing Address: P O Box 128; Russellville, MO 65074

Phone: 573-782-3511 Email: clerk.russellvillemo@outlook.com

****FOR OFFICE USE ONLY****

Identity Confirmed by: _____ License Number: _____ Date Issued: _____

License Fee Amount: \$ _____ Method of Payment: Check # _____ Credit Card _____ Cash _____

Approved by: _____ Expiration Date: _____