To All St. John Businesses:

It is time to start working on your 2022 Business License application. The 2021 Business Licenses expire on December 31, 2021. Completed 2022 Business License Applications must be received prior to March 1, 2022 in order to avoid penalty/late fees.

If you are not the person responsible to fill out the application for your business, it is your responsibility to forward the application to the correct person or department. Late fees/penalties will still apply if payment is not received by March 1st.

The following are brief guidelines of what is needed

**BUSINESS BASED ON FLAT RATE OR SQUARE FOOTAGE**

Completed applications will need to include:

COMPLETE PAGES ONE AND TWO OF PACKET and the following documentation:

1. Copy of business owner and/or site manager’s current ID.

2. Workman’s compensation document (State Mandated) or COMPLETED document stating you have less than 5 employees (included in packet).

3. Emergency Contact page listing 3 (three) local contacts with current address and phone number. MUST list three (3) to be considered acceptable.
4. Application for Separate license for Vending Machines and/or ATM if applicable. If none on premises please mark N/A; do not leave blank.

A COPY OF THE FEE SCHEDULE IS INCLUDED FOR YOUR REFERENCE

**BUSINESS BASED ON GROSS SALES, MANUFACTURED GOODS, OR SERVICE FEES, ET**

ALL PAGES MUST BE COMPLETED AND RETURNED BEFORE MARCH 1, 2022 OR A LATE FEE/PENALTY WILL BE ADDED TO LICENSE FEE. (See information on page 3 on how late fees are calculated)

COMPLETE PAGES ONE AND TWO OF PACKET and the following information/documentation:

1. NOTARIZED Affidavit of Gross Sales, Aggregate Goods and Service Fees including supporting documentation. EX: copy of business’s state sales tax return or coupons for the prior year;

2. STATE TAX I.D. NUMBER AND FEDERAL EMPLOYER I.D. NUMBER. Businesses with multiple locations, this is the number registered to the St. John Branch. Application is incomplete if not included.

3. Copy of business owner and/or site manager’s current ID.

4. Workman’s compensation document (State Mandated) or COMPLETED document stating you have less than 5 employees (included in packet).

5. Emergency Contact page listing 3 (three) local contacts with current address and phone number. MUST list three (3) to be considered acceptable.

6. Application for separate license for Vending Machines and/or ATM if applicable. If none on premises please mark N/A; do not leave blank.

7. A copy of the “No Tax Due” letter due from Jefferson City, MO.
PLEASE NOTE THAT THIS YEAR’S LICENSE PACKET DOES NOT INCLUDE THE LICENSE FEE WORKSHEET FOR SALES, SERVICE FEES, OR MANUFACTURING FEES.

Once the completed application has been received, we will calculate the fee and e-mail you an invoice along with the completed calculation sheet. Please make sure you provide a correct and legible email address for mailing the invoice. If you disagree with the amount calculated you may contact Helen or Connie at (314) 427-8700, #3.

If paying by check, payment must be received by the City within 20 days of receiving the invoice to prevent late fees being added to the original amount due. For your convenience, this year we will be accepting payment by phone to help speed the completion process.

Licenses will be issued once payment in full is received. Licenses will be mailed to the local business address unless otherwise requested.

In an effort to being more efficient, the completed application may be emailed to us at:  hgennaria@cityofstjohn.org
Once it has been received and reviewed for completeness you will receive notification of same.

BUSINESS LICENSE LATE FEE/ PENALTY CALCULATIONS ARE DONE AS FOLLOWS:
Completed application received after March 1st…………….$35.00
Each additional month until completed application is Received and paid …………………………………………. $10.00/month

EXAMPLE:  A completed application received on July 15th would incur the following late fees:
Late fee for March  $35
Late fee for April    $10
Late fee for May     $10
Late fee for June    $10
Late fee for July    $10 - Total amount of late fees, if paid before August 1st, would be $75
In closing, please keep in mind that areas that are not completely filled in will be considered incomplete and your application will be returned to you for completion. If you come to a field that does not apply to you, don’t leave it blank; write “N/A” in it.

If you have any questions please feel free to contact Helen Gennaria or myself. We can be reached during regular business hours of 8am to 5 pm, M-F at (314) 427-8700, #3 on the greeting menu.

Sincerely,

Connie S. Poteet
Connie S. Poteet
Asst. City Manager
CITY OF ST. JOHN, MISSOURI
APPLICATION FOR 2022
BUSINESS LICENSE

NEW_______ RENEWAL _____

BUSINESS NAME: ____________________ ADDRESS: ____________________

BUSINESS DESCRIPTION: ____________________

BUSINESS OWNER NAME
OWNER FULL HOME ADDRESS

SITE MGR. NAME
MGR. FULL HOME ADDRESS

BUILDING OWNER NAME
BUILDING OWNER PHONE #

ST. JOHN BUSINESS PHONE #: __________ PHONE CO. NAME __________
BUSINESS OWNER HOME PHONE #: __________________
SITE MGR. HOME PHONE #: __________________

ALARM CO. NAME, ADDRESS, & PHONE # (IF APPLICABLE): ____________________

NAME & ADDRESS OF TRASH HAULING CO. ALL INFO REQUIRED: ____________________

IF SAID LICENSE IS GRANTED, I AGREE TO COMPLY WITH AND ABIDE BY ALL ORDINANCES OF CITY OF ST. JOHN PERTAINING THERETO.

_____________ DATE ______________ APPLICANT SIGNATURE

For Office Use Only

LICENSE # ISSUED: __________
DATE ISSUED: __________
LICENSE FEE: __________
PENALTIES: __________
TOTAL PAID: __________

For Business Owner/Mgr

BUSINESS TYPE (CHECK ONE)
RETAIL________________
WHOLESALE________________
MFG________________
SERVICE________________
SQ FOOTAGE __________
TYPE OF OWNERSHIP:  SOLE OWNER_______
                    PARTNERSHIP_______(# OF PARTNERS _____)
                    CORPORATION_______

IF PARTNERSHIP, ATTACH A LIST OF EACH PARTNER’S NAME, FULL ADDRESS & PHONE #
AND PERCENTAGE OF COMPANY THEY OWN. (FOR EXAMPLE: 1/2, 1/3, 2/3, ETC.)

IS THIS THE MAIN OFFICE?  YES______NO_______

IF NOT THE MAIN OFFICE, IS THIS A BRANCH OF THE BUSINESS?  YES _____ NO _____

IF THE ST. JOHN BUSINESS IS A BRANCH OF THE MAIN COMPANY, GIVE COMPLETE NAME,
ADDRESS, & PHONE # OF THE MAIN COMPANY:
________________________________________________________________________
________________________________________________________________________

DO SALES GO THROUGH:  THIS OFFICE ________ OR       THE MAIN OFFICE ________

E-MAIL ADDRESS:___________________________________________________________

WEBSITE ADDRESS: _______________________________________________________

TOTAL AMOUNT OF SQUARE FOOTAGE
(If your license fee is based on this) ________________________________________

TOTAL # OF EMPLOYEES ____________________________________________________

STATE SALES TAX # FOR THE ST. JOHN BUSINESS: ______________________________

FEDERAL EMPLOYER I.D. # OR SOCIAL SECURITY #: ______________________________

CONTACT PERSON IN SALES TAX DEPT. (Required if applicable)

________________________________________________________________________

FULL NAME                              PHONE NUMBER
IMPORTANT NOTES:

IF ANY QUESTIONS ARE NOT APPLICABLE TO YOUR BUSINESS, ANSWER IT WITH “N/A”; DO NOT LEAVE IT BLANK. IF ANY QUESTIONS ARE NOT ANSWERED ENTIRELY, THE APPLICATION WILL BE RETURNED TO YOU.

IF ANY REQUIRED DOCUMENTS ARE NOT SUBMITTED, THE APPLICATION WILL BE RETURNED TO YOU.

IF YOUR LICENSE FEE IS BASED ON SQUARE FOOTAGE, YOU MUST LIST THE AMOUNT OF INTERIOR SQUARE FOOTAGE ON PAGE 2 OF THE APPLICATION.

IF YOUR LICENSE IS BASED ON A FLAT RATE OR SQUARE FOOTAGE, YOUR PAYMENT MUST ALSO BE INCLUDED WITH YOUR APPLICATION; INCLUDING ANY PENALTIES & LATE FEES AS WELL.

IF YOUR LICENSE IS BASED ON GROSS SALES, MANUFACTURED GOODS, OR SERVICE FEES, THE CITY WILL CALCULATE THE LICENSE FEE FOR YOU AND SEND YOU AN INVOICE FOR THE AMOUNT DUE. YOU WILL HAVE 15 DAYS TO MAKE YOUR PAYMENT.

AGAIN, AS A REMINDER, ANY APPLICATIONS RECEIVED AFTER MARCH 1ST WILL INCUR LATE FEES.
Chapter 610. Miscellaneous Business Licenses — Regulations

Article I. In General

Section 610.020. Fees Prescribed.


A. License Fees Generally.

1. For the various businesses listed below, the following yearly business license fees are set:
   [Ord. No. 1111 § 1, 11-21-2016]

   Banks/lending institutions, etc. $750.00
   Funeral homes and crematories $500.00
   Ice cream vendors (mobile) $50.00
   Loan companies
   (i.e. Pay day loans, title loans, check cashing loans, etc.) $400.00
   Nursing homes (per State licensed bed). $10.00
   Office with no sales (per square foot) $0.10
   Off-site ATM machines (per machine) $300.00
   Solicitors (door-to-door per person) $50.00
   See Subsection (C) hereof also
   Towed vehicle temporary storage lots $250.00
   Trash haulers $150.00
   Warehouses (per square foot) $0.10

2. In the instance that any of the above-stated fees calculate out to an amount lower than the minimum license fees, the minimum retail license fees will prevail.

3. For businesses which will be converting from a flat rate license fee to a gross sales/service fee rate, a "three (3) year phase-in" period is hereby created. Businesses will pay one-third (1/3) of the business license fee due under the new schedule the first (1st) year, two-thirds (2/3) of the business license fee due under the new schedule the second (2nd) year, and the full amount due under the new schedule the third (3rd) year and each year thereafter. The phase-in period will not apply to any business who did not have a business license issued at the time of the August 5, 2003 election.
B. All businesses not listed herein shall be taxed on gross sales unless a specific license is issued to that business under another Section of this Title.

C. **Canvassers, Peddlers, Solicitors And Political Solicitors.**
   1. Canvassers, peddlers, solicitors and political solicitors for profit must register with the City Manager's office and upon payment of a fee of fifty dollars ($50.00) per person so canvassing, peddling or soliciting, shall receive proper identification therefore, to conduct said business during daylight hours only.
   
   2. Canvassers, peddlers, solicitors and political solicitors, not for profit, must register said organization with the City Manager's office and obtain identification for each person of the organization so canvassing, peddling or soliciting. Soliciting may be conducted during daylight hours only, with no charge therefore.

D. No person or organization shall be granted a license under this Section unless such person or organization is of good moral character. It is the City Manager's responsibility to determine if an applicant is of good moral character.

E. The yearly license fee is based on the guidelines as set forth in Section 605.090. No license to operate a tow truck shall be issued until and unless the applicant shall first obtain a policy of insurance from a company authorized to do business in the State of Missouri or a bond of indemnity, acceptable to the City Manager, with limits for bodily injury liability of at least twenty-five thousand dollars ($25,000.00) for each person, fifty thousand dollars ($50,000.00) for each accident and property damage liability of ten thousand dollars ($10,000.00) for each accident.
**AFFIDAVIT OF GROSS SALES, AGGREGATE GOODS AND SERVICE FEES**

On this ______ day of ______________________, 20______, before me personally appeared:

<table>
<thead>
<tr>
<th>Name of Applicant</th>
<th>Title</th>
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<table>
<thead>
<tr>
<th>Home Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<table>
<thead>
<tr>
<th>Business Name</th>
<th>Business Address</th>
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</table>

Who stated the sum of $__________________ constituted the **total gross sales/service fees/aggregate dollar amount of goods manufactured** for the above named business for the year 2021 (Beginning Jan. 1st and ending Dec. 31st), and who further stated the sum of $__________________ constitutes the **total estimated gross sales/service fees/aggregate dollar amount of goods to be manufactured** for the year 2022 (Beginning Jan. 1st and ending Dec. 31st).

________________________
Applicants Signature

Subscribed and sworn to before me this _____ day of ____________, 2022.

________________________
Notary Public

My Commission Expires: ______________________

________________________
Notary Signature
CITY OF ST. JOHN, MISSOURI
APPLICATION FOR SEPARATE BUSINESS LICENSE

In addition to the regular business license, there are separate license fees required for certain businesses. If an item below applies to you, please check and submit the additional license fee. If it doesn’t apply to you, please fill in your business name and the note “N/A” behind it (i.e. City of St. John – N/A)

________________________________________________________________________

BUSINESS NAME

__________________________  Retail Sales of Tobacco Products  . . . . . . . . . . . . . . . .

$125.00  (Cigarettes not sold in Vending Machines)

__________________________  Off-Site Bank ATM machines (per machine)  . . . . . . . . .

$300.00

________________________________________________________________________

APPLICANT SIGNATURE
PHOTO ID/REQUIRED CHECKS

NEW BUSINESSES
Criminal record checks and Photo ID’s must be supplied on all owners and managers for new businesses. Please contact the St. Louis County Police Record Department, 7900 Forsyth, Clayton, MO 63105, (636)-529-8210 or The Missouri State Highway Patrol (1-573-751-3313) and attach a copy of the fingerprint card(s) and record check(s) with your new business license application.

RENEWAL LICENSES
For renewals, you must submit a current State Issued Photo ID or Driver’s License with your renewal application for owners and managers.

PLEASE ATTACH OWNERS’ AND LOCAL MANAGERS’ CURRENT ID TO THIS FORM. IF MANAGER IS NOT ON-SITE, INCLUDE AN ON-SITE EMPLOYEE ID IN PLACE OF THE ON-SITE MANAGER’S.
EMERGENCY CONTACTS

It is mandatory that all business owners and/or managers submit at least three emergency contact persons who can be reached after normal business hours in the event of an emergency. The City of St. John Police Department needs to have on file the name, complete home address, and phone number(s) of each contact person so that someone can be reached in case of an emergency. If less than 3 separate persons names & information are submitted, the form is considered incomplete and will be returned to you for completion.

NOTE: IF OWNER AND/OR MANAGER WANTS TO BE CONTACTED, INCLUDE THEIR INFORMATION BELOW AS ONE AND/OR TWO OF THE CONTACTS.

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>PHONE</th>
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<tbody>
<tr>
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ST. JOHN BUSINESS NAME: ________________________________

BUSINESS ADDRESS: ________________________________
Pursuant to State Statute, all businesses employing five or more employees are required to provide proof of workman’s compensation insurance. In addition, the City is required to verify this coverage yearly prior to the issuance of a business license.

In the event you employ less than five employees and do not supply workman’s compensation insurance, please fill out the form below and have it notarized. This notarized statement, for less than five (5) employees, will be accepted in lieu of a workman’s compensation certificate.

On this____ day of_______________, 20____, before me personally appeared:

Name of Applicant:__________________________________________________________

St. John Business
Name______________________________________________________________

Title_______________________________________________________________

Business Address_____________________________________________________

I, ________________________________, do hereby swear that I employ less than five (5) employees (including myself) in my business at the above stated address and do not provide Workmen’s Compensation Insurance for my employees.

Applicant’s Signature ________________________________ Dated: ______________

Subscribed and sworn to before me this ___day of ______________, 20____

Notary Public: ______________________________________

My Commission Expires:______________________________

Notary Seal Below: