



Business License Application

New Business New Owner New Location
 Today's Date: _____ Date business will open: _____
 Business Incorporated: yes no Type of Business: _____
 Name of Business: _____ Business Phone: _____
 Location of Business in Sikeston: _____
 Previous Address: _____
 Fax Number: _____ Email address: _____
 Owner of Business: _____ Home Phone: _____
 Home Address: _____
 State Sales Tax # _____ How many employees: _____
 Owner of Building: _____ Phone Number: _____
 Address: _____

Normal inspection procedure may take a minimum of seven (7) working days.

OFFICIAL USE ONLY

Account ID _____ **Customer ID** _____
Date Inspection Fee Paid _____ **Initials** _____

Business Taxes:

Business Personal Taxes Paid: _____ **Business Real Estate Taxes Paid:** _____
Personal Property Taxes Paid: _____ **Personal Real Estate Taxes Paid:** _____

Location Taxes:

Real Estate Taxes Paid: _____

_____ **City Collector** **Approved: Yes** _____ **No** _____

_____ **Date of License** **License #:** _____



EMERGENCY NOTIFICATION INFORMATION
Sikeston Department of Public Safety
Police and Fire Communications Division

Date: _____

Name of Business: _____

Location of Business: _____

Type of Business: _____

Mailing Address: _____

Phone Number: _____ **Fax Number:** _____

After Hours Phone Number: _____

Business Hours: _____

Business Owner: _____

Building Owner: _____ **Phone Number:** _____

Please list three (3) local persons that have keys to the business
in the order that they should be contacted.

Please do not include a work number if it is the same as above.

	Name	Home Phone	Cell Phone/Pager
1.	_____		
2.	_____		
3.	_____		

Alarm Company: _____ **Phone Number:** _____

Use toll-free number for Alarm company, not the local business number.

Please return this form by mail to: Sikeston Department of Public Safety
Attention: Communications Supervisor
215 N. New Madrid
Sikeston, MO 63801

Or by FAX to: (573) 471-7872

If you need any further assistance with completing this form, please call (573) 471-4711.