



City Of Duquesne  
 1501 S Duquesne Road \* Joplin MO 64801  
 417-781-5085 \* Fax 417-781-4652

**Business License / Contractor License Application**

New Applicant  Renewal Year: \_\_\_\_\_ Date of application: \_\_\_\_\_

Business Name: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City, St., Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, St., Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Type:  Corporation  LLC  Partnership  Individual Fax Phone #: \_\_\_\_\_

Choose one:  Wholesale  Retail  Manufacturing  Labor/Service Only  Other: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, St., Zip: \_\_\_\_\_

Federal ID #: \_\_\_\_\_ State ID#: \_\_\_\_\_ # Years in Business: \_\_\_\_\_

Missouri Sales Tax #: \_\_\_\_\_ (If collecting any tax)

*If you collect Missouri sales tax, "No Tax Due" Statement from Missouri Dept. of Revenue is required.*

*Copy of General Liability & Worker's Comp (if applicable) with "City of Duquesne" as Certificate Holder is required for ALL contractors and subcontractors. COI can be faxed to 417-781-4652 or emailed to t.ingram@duquesnemo.org*

**Fee: Business**

- Business location other than residence (\$50)
- Home-Based at personal residence (\$50)
- Mobile Home Park / Peddler (\$50)
- Other: \_\_\_\_\_ (\$50)

**Contractor**

- Licensed Building Contractor (\$50)
- Licensed Electrician (\$50)
- Licensed Plumber (\$50)
- Licensed HVAC Contractor (\$50)
- Other: (Be specific) \_\_\_\_\_ (\$50)

Description of Business: (i.e.: Clothing retail, insurance, eatery, masonry, roofer) \_\_\_\_\_

**Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

City Use Only			
Date Received: _____	Paid by check #: _____	Paid by Cash _____	Amount \$ _____
License #: _____	Receipt #: _____	License Sent/Date: _____	
Comment: _____			
Approved Date: _____	License issued by: _____, City Clerk		