

**CITY OF SUNSET HILLS**

**TEMPORARY BUSINESS LICENSE APPLICATION**

*New* \_\_\_\_\_

*Renewal* \_\_\_\_\_

*Date* \_\_\_\_\_

To: City Clerk  
City of Sunset Hills, Missouri  
3939 S. Lindbergh Blvd.  
Sunset Hills, MO 63127-1395

I/we the undersigned, hereby make application to establish, maintain or conduct:

Business Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Location in Sunset Hills: \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Do you have permission of the property owner? \_\_\_\_\_

In said City, warranting the following information to be true: Business owned by: (Please check one)

Individual  Partnership  Corporation  in the state of: \_\_\_\_\_

Legal name of owner(s) \_\_\_\_\_

Date(s) and time(s) Business will be operating: \_\_\_\_\_

\_\_\_\_\_



Are you required to cover your Workers Compensation liability under chapter 287 R.S.MO.  
Yes  No  ? If you checked "Yes" you must submit a copy of the certificate of insurance for  
Worker's Compensation or your license will not be granted.

Applicant

Title