

**APPLICATION FOR BUSINESS LICENSE - 2019  
MONROE CITY, MISSOURI**

**LICENSE NUMBER:** \_\_\_\_\_

**NAME OF BUSINESS:** \_\_\_\_\_

**DBA:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY, STATE & ZIP:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**OTHER PHONE #:** \_\_\_\_\_

**OWNER/CONTACT:** \_\_\_\_\_

**THIS YEAR ONLY:** \_\_\_\_\_

**LOCATION IN MC:** \_\_\_\_\_

**ENTITY:** \_\_\_\_\_

**WASTE DISPOSAL:** \_\_\_\_\_

**WORKER'S COMP:** \_\_\_\_\_

**GOODS/RETAIL:** \_\_\_\_\_

**MO ID NO.:** \_\_\_\_\_

**CITY WEB SITE:** **Yes, I want to be on the City's web site**

**DESCRIBE BUSINESS:** \_\_\_\_\_

**YOUR WEB SITE:** \_\_\_\_\_

**YOUR EMAIL ADDRESS:** \_\_\_\_\_

**WORKERS' COMPENSATION EXEMPTION STATEMENT  
FOR WORKER'S COMP STATUS 3 & 4 ONLY**

By signing this application, I hereby certify that the business described in this application is exempt from the requirements of the Missouri Workers' Compensation Law, and therefore, per Section 287.061 RSMo, is not required to provide the City with a Certificate of Insurance.

To the best of my knowledge, the above information is correct except as noted. I also understand that intentionally reporting false information on this form may cause my business license to be revoked. I request that I be issued a business license for **2019**. Enclosed with this application is the license fee of \$25.00.

\_\_\_\_\_  
Signature of Owner or Authorized Representative

\_\_\_\_\_  
Date