



Village of Innsbrook

1835 Highway F, Innsbrook, MO 63390

636-745-8844 * Fax 636-745-7755

Email: innsbrookcity@centurytel.net

www.villageofinnsbrook.org

Application for Business Permit

Application **MUST** be completed in full for each location in Innsbrook and returned with remittance made payable to the Village of Innsbrook. For question please contact the Village Administrator/Clerk at (636)745-8844.

BUSINESS INFORMATION

1. Name of Business: _____
2. Date Business began/will begin operation in Innsbrook: _____
3. Local Business Address(es): _____
Please provide addresses for each property in Innsbrook associated with the Business.
4. Local Business Telephone Number: _____
5. Name of Manager/Agent: _____
6. Contact Telephone Number for Manager/Agent: _____
7. Email Address: _____
8. Federal Employer Identification Number: _____
9. Missouri Retail Sales Tax Identification Number: _____
Please provide this number along with a "Certificate of No Tax Due" if you collect and remit sales tax to the state of Missouri.
10. Number of Employees at location: _____
11. Provide brief description of Business: _____

Application Fee: \$30.00

Check made payable to the "Village of Innsbrook".

Send to: Village of Innsbrook, 1835 Highway F, Innsbrook, Missouri 63390

*The information provided is true, correct and accurate to the best of my knowledge and belief.
I am authorized to complete this application on behalf of the above referenced Business.*

Applicant Printed Name: _____

Applicant Signature: _____

Applicant Title: _____ **Date:** _____

After review of this application and attached No Tax Due letter, and receipt of the application fee, the Village of Innsbrook hereby approves the application. This completed form shall constitute a valid Business Permit.

Village Administrator/Clerk: _____ Date: _____ Permit No. _____