

Village of Innsbrook

1835 Highway F, Innsbrook, MO 63390 636-745-8844 * Fax 636-745-7755 Email: admin@villageofinnsbrook.org www.villageofinnsbrook.org

Application for Business Permit

Application **MUST** be completed in full for <u>each location</u> 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: Please provide separate applications 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. (Short term rental properties must complete line 9.)
10.	Number of Employees at location:
11.	Provide brief description of Business:
	If rental property: AirBnB VRBO Other: (Check all that apply.)
Application Fee: \$100.00 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:	
App	olicant 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.	
Villa	ge Administrator/Clerk: Date: Permit No