



798 S. Marshall St.  
Marshfield, MO 65706  
417-859-2352

**FOOD TRUCK BUSINESS LICENSE APPLICATION** For the \_\_\_\_\_ year

Please complete this application in its entirety. Business license fees are \$25 and must be paid at time of application. Incomplete applications will not be processed.

**BUSINESS INFORMATION**      New \_\_\_\_\_      Renewal \_\_\_\_\_

Name of Business \_\_\_\_\_

Business Type \_\_\_\_\_

Products/Services Offered \_\_\_\_\_

# Of Employee's \_\_\_\_\_

**PHYSICAL ADDRESS:** \_\_\_\_\_

Check if same as above

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

Business Phone \_\_\_\_\_

Business Email \_\_\_\_\_

Missouri Sales Tax # \_\_\_\_\_ Federal ID # \_\_\_\_\_

MO. Statute 144.083 Business license requirement: **ALL BUSINESSES THAT CHARGE SALES TAX MUST SUBMIT A DEPT. OF REVENUE NO TAX DUE VERIFICATION.**

The City will not issue a license unless a no tax due verification letter is provided.

**BUSINESS OWNERS**

1) Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

2) Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

*Applicant affirms by signature below that said business does not currently, nor will it in the future employ non-documented persons, with the understanding that doing so would be in violation of both Federal Law and the laws of the State of Missouri.*

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

Office Use Only:  
Paid by: Cash \_\_\_\_\_ Check \_\_\_\_\_ Card \_\_\_\_\_ No Tax Verf. Complete \_\_\_\_\_