

**CITY OF WARRENTON  
APPLICATION FOR OCCUPATIONAL  
LICENSE**

Legal Name of Business \_\_\_\_\_ Missouri Sales Tax # \_\_\_\_\_

Applicant Name \_\_\_\_\_ Federal ID# or Social Security # \_\_\_\_\_

Applicant Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Business Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Business Phone# \_\_\_\_\_ Owner's Phone # \_\_\_\_\_

Name of Owner(s) \_\_\_\_\_

Address of Owner(s) \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Type of Business: \_\_\_\_\_ Drivers License # \_\_\_\_\_

Fax Number \_\_\_\_\_

Will liquor of any type be sold or served at this location? \_\_\_\_\_ Year Established \_\_\_\_\_

\*\*\*\*\*  
(City Hall Staff Only)

Group Classification: \_\_\_\_\_

\*\*\*\*\*  
I, \_\_\_\_\_, do hereby certify that the foregoing is a true and correct statement.

Should any of the statements be subsequently proven inaccurate I understand the City of Warrenton may suspend or revoke my Occupational License. All licenses must be renewed annually.

I also understand that a license will not be issued if any past due City of Warrenton taxes are owed.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

License Number issued: \_\_\_\_\_

Fee Due for License: \_\_\_\_\_

Subscribed, sworn to and affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(Notary Stamp)

Notary Public, State of Missouri

\_\_\_\_\_  
My Commission Expires \_\_\_\_\_

Commissioned to the County of \_\_\_\_\_