FLAT FEE/SERVICE BUSINESS LICENSE

INSIDE JEFFERSON CITY LIMITS
COMMERCIAL/NON-RESIDENTIAL LOCATION

REQUIREMENTS:

1. Completed license application and license fee payment.
2. If you are a contractor, either proof of Worker's Compensation OR an Affidavit of Exemption (see http://www.moga.mo.gov/statutes/chapters/chap287.htm).
3. All applicants must contact the following departments for inspections:

   Fire Department at (573)634-6407 or (573)634-6401
   Building Department at (573)634-6410

   You will not be allowed to open for business until approved by these departments. This includes new businesses, change in location and change in ownership.

Completed application (and all applicable documentation) and payment may be dropped off at or mailed to:

City of Jefferson, John G. Christy Municipal Building
Attn: Business Licensing
320 E. McCarty Street, Room 202
Jefferson City, MO 65101

We also accept submittal of your application (and all applicable documentation) by email (dhartley@jeffcitymo.org) or fax (573-634-6329) and subsequent credit or debit card payment by phone (573-634-6322).

You may find the relevant City code, Chapter 17 – Licenses, Taxation and Miscellaneous Business Regulations – online at http://www.jeffersoncitymo.gov/government/city_code.php. You are encouraged to review its contents.

Contact Debbie Hartley, Business License Administrator at (573) 634-6322 or dhartley@jeffcitymo.org for any further questions.

BENEFICIAL REFERENCES:

1. To see if you qualify for a Cole County Merchants License, contact the Cole County Collector's office located at 311 E. High Street, Room 100 or call (573) 634-9124 or you may go to their website. http://www.colecountycollector.org/collector.htm?id=117
2. To register your business name, you may either go to the Missouri Secretary of State's office located at 600 West Main Street, call (573) 751-4153 or go their website. http://www.sos.mo.gov/forms/corp/corp56.pdf
3. To decide which form of business entity you wish to establish, you may visit the local IRS office located at 3702 West Truman Blvd., call (573) 635-6827 or you may go to their website. http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/Business-Structures
4. To apply for a Federal Employee Identification number, you may visit the local IRS office located at 3702 W. Truman Blvd., Jefferson City, MO, call (573)635-6827 or go to their website: http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/Employer-ID-Numbers-EINs.
5. To apply for a Missouri State Sales Tax number, contact the Missouri Department of Revenue at (573)751-9268 or visit their website: http://dor.mo.gov/business/

OFFICE OF THE CITY LICENSE INSPECTOR
320 EAST MCCARTY ST.
JEFFERSON CITY, MO 65101
PHONE: (573)634-6322 FAX: (573)634-6329
EMAIL: DHARTLEY@JEFFCITYMO.ORG

FLAT FEE BUSINESS LICENSE APPLICATION

INSIDE CITY LIMITS COMMERCIAL LOCATION

CHECK ONE OF THE FOLLOWING: NEW BUSINESS: ☐ CHANGE IN LOCATION: ☐ CHANGE IN OWNERSHIP: ☐

BUSINESS NAME: _____

Doing Business As: _____

BUSINESS PHYSICAL LOCATION: _____

MAILING ADDRESS
(IF DIFFERENT THAN ABOVE): _____

PHONE # _____ FAX # _____ CELL # _____

EMAIL: _____

TYPE OF BUSINESS/GOODS/
SERVICES TO BE OFFERED (BE SPECIFIC): _____

APPROXIMATE # OF EMPLOYEES: _____

OWNER NAME: _____

OWNER HOME
ADDRESS: _____

OWNER PHONE # _____

MISSOURI STATE SALES TAX NUMBER: _____

FEDERAL EMPLOYEE ID# OR DRIVERS LICENSE # _____

CONTRACTORS:
REQUIRED TO CARRY WORKERS COMPENSATION, PER MISSOURI STATE STATUTE 287.061? YES ☐ NO ☐
(If you answered yes, we will need a copy of your certificate. If you answered no, you must file an Affidavit of Exemption for Workers Compensation with our office (attached).

ALARM COMPANY NAME & PHONE NUMBER (IF APPLICABLE):

_____

EMERGENCY AFTER HOUR CONTACT NAME & PHONE NUMBER:

_____

I affirm that the information on this application is factual, that this business will be conducted in accordance with all applicable State and City laws and that all City taxes/fees have been paid. I understand that if I am approved that any false statements made by me on this application may result in the revocation of this license.

SIGNATURE: _____ DATE: _____
(Owner/Officer/Authorized Agent)

PRINT NAME OF SIGNER: _____ TITLE OF SIGNER: _____

Individuals should contact the ADA Coordinator at (573) 634-6570 to request accommodations or alternative formats as required under the Americans with Disabilities Act. Please allow three business days to process the request.

FEES (TABLE 1)

Description	Amount	Description	Amount
Abstract Agency	$ 40.00	Gymnastics/Health Club	$ 60.00
Advertising	$ 60.00	Heating/Air Conditioning ONLY	$ 50.00
Amusements, per Machine	$ 5.00	Hotels & Motels, per Sleeping Unit	$ 2.00
Architects	$ 50.00	Insurance Agent/Broker	$ 20.50
Artists	$ 15.00	Janitorial/Cleaning	$ 50.00
Auctioneers, per Day	$ 10.00	Junk Dealers/Recycler	$ 75.00
Auctioneers, per Year	$ 50.00	Karate Instructors	$ 60.00
Auto & Truck Rental Agency	$ 75.00	Key & Locksmith Shop	$ 30.00
Auto Yard, per Space	$ 2.00	Lawn Care/Landscaping	$ 50.00
Bank or Banking Facility	$ 150.00	Loan Company	$ 100.00
Barbershop, for First Chair	$ 10.00	Long Distance Telephone Company	$ 350.00
Plus $5 per year for each additional chair	$ 5.00	Manufacturing Agent	$ 60.00
Beauty Parlor, per Shop	$ 10.00	Manufacturing Companies	$ 100.00
Plus $5 per Operator	$ 5.00	Massage Therapy	$ 50.00
Beauty School	$ 50.00	Merry-Go-Rounds, per Week	$ 10.00
Billiard or Pool Tables, per Table	$ 10.00	Miniature Golf Course	$ 40.00
Bottling Works	$ 100.00	Minnow & Fish bait Dealers	$ 15.00
Boxing or Wrestling Exhibitions	$ 50.00	Movie Theaters	$ 100.00
Bowling Alley, per Alley	$ 10.00	Moving & Storage Companies	$ 75.00
Brokers/Stocks/Bonds	$ 75.00	Painting & Wallpaper Contractors	$ 60.00
Business Schools (private)	$ 60.00	Palmists	$ 100.00
Business Unspecified	$ 50.00	Pawnbroker	$ 50.00
Bus Leasing Service	$ 60.00	Photographers	$ 50.00
Cabinetmaker Shops	$ 60.00	Private Investigators	$ 60.00
Carnivals, per Day	$ 100.00	Real Estate Brokers/Appraisals	$ 60.00
Car Wash (independent of a srvc station/garage)	$ 60.00	Security/Surveillance	$ 50.00
Caterer	$ 50.00	Shooting Galleries	$ 50.00
Circus, per Day	$ 100.00	Skating Rink	$ 60.00
Cleaning & Pressing Establishment	$ 50.00	Storage Warehouse	$ 75.00
Coal Dealer	$ 40.00	Surveying/Engineering	$ 75.00
Collection Agencies	$ 60.00	Tailors	$ 15.00
Concerts, per Day	$ 5.00	Tax Service	$ 50.00
Consulting/Therapy Mgmt./Counseling	$ 60.00	Taxicabs or Limo, per Vehicle	$ 100.00
Contractors & Subcontractors	$ 75.00	Towel, Linen, Uniform & Apron Supply Svcs	$ 60.00
Dancing School/Studio	$ 60.00	Trailer Courts, per Trailer Stall	$ 2.00
Dry Cleaners	$ 50.00	Travel Agencies	$ 60.00
Employment Agency or Office	$ 60.00	Truck Terminals	$ 100.00
Express Company Agency	$ 100.00	Water Service Company	$ 100.00
Exterminators	$ 50.00	Wholesale Merchant	$ 100.00
Fortune Tellers	$ 100.00	Wood Dealers	$ 40.00

For prorating purposes, select the month that you are applying for a new license and enter the rate multiplier below.

RATE MULTIPLIER (TABLE 2)

Application Month	*Rate Multiplier*	*Application Month*	*Rate Multiplier*
January (Dec. 16-Jan. 15)	No Prorating	July (June 16-July 15)	0.50000
February (Jan. 16-Feb. 15)	0.91666	August (July 16-Aug. 15)	0.41666
March (Feb. 16-March 15)	0.83333	September (Aug. 16-Sept. 15)	0.33333
April (March 16-April 15)	0.75000	October (Sept. 16-Oct. 15)	0.25000
May (April 16-May 15)	0.66666	November (Oct. 16-Nov. 15)	0.16666
June (May 16-June 15)	0.58333	December (Nov. 16-Dec. 15)	0.08333

License Fee (Table 1) _____ x Rate Multiplier (Table 2) _____ = Amount Due _____

Round the amount to the nearest cent.

MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS

DIVISION OF WORKERS' COMPENSATION

AFFIDAVIT OF EXEMPTION FOR WORKERS' COMPENSATION INSURANCE PURSUANT TO § 287.061, RSMo

Before me, the undersigned authority, personally appeared _____
Name of Affiant

who, being duly sworn on this oath states as follows:

1. My name is _____. I am of legal age and sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated. I understand that by submitting this affidavit to the city or county for an occupational or business license as a contractor in the construction industry, I am stating that my business is exempt from carrying workers' compensation insurance coverage.

2. I am the sole proprietor, owner or partner of _____,
Name of Business
a business engaged in construction industry that is not required to purchase workers' compensation insurance coverage for the following reason:

   (Check One)

   ☐ I am a sole proprietor **and have no "employees"** as defined under the law, see page 2.

   ☐ I am a partner in a partnership **with no "employees"** as defined under the law, see page 2.

   ☐ I have filed a Notice of Employer's Exemption with the Missouri Division of Workers' Compensation (Division) for _____ to be withdrawn from
   Name of Corporation
   coverage because there are no more than two owners of the corporation who are also the only employees of the corporation. A copy of the acknowledgement letter from the Division dated _____ is enclosed.
   Date
   Further, I have not filed a notice to withdraw this exemption for my corporation with the Division and my corporation has no other workers' compensation insurance coverage.

3. I have read and reviewed the concept of "statutory employment" explained on pages 2-3. My business operation is not being carried out by persons who may be regarded as statutory employees.

4. **I understand that providing fraudulent information on this affidavit is unlawful under §§287.128, 287.061(3), 570.090, 575.040, 575.050, and/or 575.060, RSMo, and may be either a misdemeanor or a felony, punishable by imprisonment and fine, as indicated on page 3.**

_____ *Affiant* _____ *Date*

STATE OF MISSOURI)
)
COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, 20 _____

My Commission Expires: _____

_____
Notary Public (SEAL)

Affidavit of Exemption for Workers' Compensation Insurance
Applicable Statutory Provisions and Guidelines to be followed

The Division has developed the "Affidavit of Exemption for Workers' Compensation Insurance Pursuant to §287.061, RSMo" that is required to be filed by a contractor in the construction industry when he/she applies for an occupational or business license in any city or county only if the contractor does not have proof of workers' compensation insurance coverage. If a contractor fails to comply with the requirements relating to providing proof of coverage or completing the "Affidavit of Exemption" form, he/she shall be denied the business license until the contractor obtains a certificate of insurance. If the contractor submits the "Affidavit of Exemption" form to obtain the business license he/she should familiarize himself/herself with the following key statutory provisions. **Those who are unsure as to whether they may lawfully submit such affidavit should seek competent legal advice.**

Every employer who is subject to the requirements of chapter 287, RSMo must insure its workers' compensation liability with an insurance company authorized to insure such liabilities in the state of Missouri by the Missouri Department of Insurance Financial Institutions and Professional Registration or meet the Division's requirements to be self-insured. If an employer fails to obtain the insurance coverage he/she may be held liable to an injured employee for all of the benefits under the Law in either a civil law suit or in an administrative proceeding before the Division.

Employee: §287.020, RSMo: The definition of "employee" includes both full- and part-time employees, and includes every person in the service of an employer under any contract of hire, express or implied, oral or written, or under any appointment or election, including executive officers of a corporation. It includes minors whether or not they are employed in violation of the law and family members. It may include volunteer workers who do not receive any income or compensation unless the exception noted below applies.

Please Note: As an exception, the workers' compensation law does not apply to volunteers if:

- The entity is a tax-exempt organization which operates under the standards of section 501(c)(3) of the federal Internal Revenue Code;
- The volunteers are not paid wages; and
- The volunteers provide services purely on a charitable and voluntary basis.

All three requirements must be met in order for a volunteer worker not to be classified as an employee under §287.020, RSMo.

Employer: §287.030, RSMo, that defines "employer" includes a very broad category and states that every employer who has five or more employees must carry workers' compensation insurance with one exception for construction industry employers who erect, alter, demolish or repair improvements who must purchase workers' compensation insurance if they have one or more employees.

Sole Proprietor and Partner: §287.035, RSMo, provides that natural persons who are sole proprietors or partners are employers and they do not have to purchase workers' compensation insurance on themselves but they may voluntarily choose to do so. Further, close relatives by blood or marriage of sole proprietors or partners may be withdrawn from coverage but, under §287.030, these relatives are still considered to be "countable" employees. Note that these provisions do not apply if the business is a corporation or a Limited Liability Company [LLC].

Corporate Exemption (Two Owners/Employees): §287.090.5, RSMo. A corporation may withdraw from the provisions of this chapter, when there are no more than two owners of the corporation who are also the only employees of the corporation, by filing with the Division notice of election to be withdrawn. The election shall take effect and continue from the date of filing with the Division by the corporation of the notice of withdrawal from liability under this chapter. Any corporation making such an election may withdraw its election by filing with the Division a notice to withdraw the election, which shall take effect thirty days after the date of the filing or at such later date as may be specified in the notice of withdrawal.

Statutory Employer: §287.040, RSMo, provides that certain independent contractors may be considered to be "employees" of the person who hired them for workers' compensation purposes, under the legal principle known as "statutory employment." Missouri Law does not define "independent contractor." Missouri courts use three factors to determine when a statutory employment relationship exists: (1) the work is performed pursuant to a contract; (2) the injury occurs on or about the premises of the statutory employer; and (3) the work is in the usual course of the statutory employer's business. An employer cannot avoid its workers' compensation liability by hiring independent contractors to perform jobs that would otherwise be performed by its employees. A contract need not be in writing. The Missouri courts have ruled that the "employer's premises" can include a location where the employer is carrying on its business temporarily. As a construction industry employer you may be held responsible to pay workers' compensation benefits to an independent contractor or uninsured subcontractor or their employees. The immediate contractor or subcontractor is liable as an employer of the employees of the subcontractor. The liability of the immediate employer is primary and that of the others is secondary and any compensation benefits that are paid by those who are secondarily liable may be recovered from those primarily liable.

Please Note: A general contractor can require subcontractors to carry workers' compensation insurance. Generally, the Law says that the general contractor is liable for any injuries sustained by uninsured subcontractors or their uninsured employees (§287.040, RSMo). Because of this, the general contractor's insurer will charge an additional premium if the subcontractor cannot provide proof of coverage, even if the subcontractor has no employees. If the general contractor says he/she will not hire the subcontractor unless he/she has a policy and insures himself/herself, the subcontractor would need to buy a policy covering their business or himself/herself or work for a general contractor who does not make this a requirement.

Criminal Penalties: §287.128, RSMo makes it unlawful for any person to knowingly make or cause to be made any false or fraudulent material statement or material representation for the purpose of obtaining or denying any benefit. This is considered a class D felony punishable by fine up to $10,000 or double the value of the fraud whichever is greater. A subsequent violation is a class C felony.

Any person who knowingly misrepresents any fact in order to obtain workers' compensation insurance at less than the proper rate for that insurance shall be guilty of a class A misdemeanor. A subsequent violation is a class D felony. Any employer who knowingly fails to insure his liability pursuant to this chapter shall be guilty of a class A misdemeanor and, in addition, is liable to the state of Missouri for a penalty in an amount up to three times the annual premium the employer would have paid had such employer been insured or up to $50,000, whichever amount is greater. A subsequent violation is a class D felony.

Further, providing false information with the intent to deceive also can constitute a felony under §§570.090 (Forgery) and 575.040 (Perjury), and a misdemeanor under §§575.050 (False Affidavit) and 575.060 (False Declaration).