

CITY OF META
2025 Business/Liquor License Application

Name of Business: _____

Business Physical Address: _____

Business Mailing Address: _____

Business Phone No.: _____ Cell Phone: _____ Fax: _____

Type of Business: _____

Will food or beverages be sold? _____

(If Applicable) Liquor by the Drink: Yes ___ No ___ Liquor by Original Package: Yes ___ No ___

Name of Applicant Applying: _____

Relationship to Business: Owner/Manager/President/Other _____

Name of Owner if different than Applicant: _____

Address of Owner if different than Applicant: _____

Alternate Contact Name/Number in case of Emergency: _____

Missouri Retail Sales Tax Number (If applicable): _____

Federal Tax ID Number/Social Security Number _____

Have you ever been convicted of any violation of laws or ordinance of this or any other state or municipality other than minor traffic violations? _____

\$40.00 is due for each business license

\$65.00 is due for each liquor license

Personal and Real Estate Taxes (delinquent/current) must be paid in full to the Osage County Collector before a business license can be approved.

A copy of no sales tax due statement from Department of Revenue (If applicable)

A copy of state retail sales license, Interstate Commerce commission exemption certificate, or sales tax exemption certificate (If applicable)

A copy of Workers Compensation Insurance (If applicable)

Signature of Applicant

Date