

# Getting Started

## Procedures for Opening a Business in Moline Acres

Below are procedures an entrepreneur will need to adhere to in order to open a business in the City of Moline Acres. There is also a checklist provided with steps needed to receive a business license.

1. You must complete an application and attach a business proposal. The application fee is \$25.00. This must be submitted to the City Clerk at least one week prior to the Board of Alderpersons meeting which is held the second Tuesday of every month.
2. After you have completed the application and submitted required paperwork, the City Clerk will inform you of the date in which you will appear before the Board of Alderpersons.

**NOTE: Our Board of Alderpersons meeting is held on the 2<sup>nd</sup> Tuesday of each month at 7:00pm. All applications and presentations are to be turned in by the 1<sup>st</sup> Tuesday of the month, in order to be on that month's agenda. Any presentations turned in after the 1<sup>st</sup> Tuesday will be placed on next month's agenda for approval. No permits or licenses will be issued until the business has been approved by the Board of Aldermen. Any business that is in operation and has not been approved will be subject to fines issued by the City of Moline Acres.**

### **REMINDERS:**

**All business licenses are to be renewed by December 31<sup>st</sup> of each year. Any licenses that have not been renewed by the expiration date, a \$250 Administrative Fee for Delinquent Licenses will be applied the first day of the following month in addition to \$42 late fee. Failure to update your renew your license can result in closure of business.**

**If your business is required to pay a quarterly business license fee; all fees are due to be paid the last business day of January, April, July and October. If payment is not made by the last business day of the quarter, a \$42.00 late fee will be applied the first day of each month until the taxes are paid.**

**Thank you for considering our city to begin your business.**

**CITY OF MOLINE ACRES  
APPLICATION FOR BUSINESS LICENSE**

Please fill out the application and attach a copy of your presentation along with a non-refundable fee of \$25.00. All applications and presentations are to be turned in by the 1<sup>st</sup> Tuesday of the month, in order to be on that month's agenda. Any presentations turned in after the 1<sup>st</sup> Tuesday will be placed on next month's agenda for approval. No permits or licenses will be issued until the business has been approved by the Board of Aldermen. Any business that is in operation and has not been approved will be subject to fines issued by the City of Moline Acres.

Calendar Year \_\_\_\_\_

Company Name: \_\_\_\_\_

MO Tax ID # \_\_\_\_\_

Owner (s) Name: \_\_\_\_\_

Bus. Phone #: ( ) \_\_\_\_ - \_\_\_\_

Owner (s) Address: \_\_\_\_\_

Owner Phone :( ) \_\_\_\_ - \_\_\_\_

Business Address: \_\_\_\_\_

What type of Business do you operate? \_\_\_\_\_

Who will your Business be catering to? \_\_\_\_\_

Will your Business be requesting a liquor License? \_\_\_\_\_yes \_\_\_\_\_no

How long have you been in business? \_\_\_\_months \_\_\_\_years

How long have you been at the above location? \_\_\_\_months \_\_\_\_years

Has your business been licensed previously by Moline Acres? \_\_\_\_yes \_\_\_\_no

(If yes, give latest year) \_\_\_\_\_

**Hours of Operation:**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**THIS REQUEST HAS BEEN SUBSCRIBED AND SWORN TO ME THIS \_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_  
BY THE CITY OF MOLINE ACRES. THIS LICENSE WILL BE REVOKED IF THE APPLICANT IS  
FOUND NOT TO BE IN COMPLIANCE WITH THE CITY OF MOLINE ACRES.**

I understand the terms and conditions listed in the above box. By signing below, I am agreeing that the information is true and I will comply with all of the city's ordinances.

\_\_\_\_\_  
Applicant's Signature Title/Position Date

\_\_\_\_\_  
City Personnel Signature Date

-----FOR OFFICE USE ONLY-----

Board Approval Date \_\_\_\_\_ Moline Acres License# \_\_\_\_\_

Type of License: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Payment Date \_\_\_\_\_  
Receipt # \_\_\_\_\_ Payment Type \_\_\_\_\_

## PROCEDURES FOR OPENING A BUSINESS IN MOLINE ACRES CHECKLIST

1. Completed application along with attached business proposal and floor plans of space Initial\_\_\_\_  
Date\_\_/\_\_/\_\_\_\_
2. Must appear before the board with Business Proposal Initial\_\_\_\_ Date\_\_/\_\_/\_\_\_\_
3. Approved Inspection- \$95.00 (All permits including Building, Electrical, Plumbing, Mechanical etc.. must be signed By Moline Acres City Hall Inspector) Initial\_\_\_\_ Date\_\_/\_\_/\_\_\_\_
4. Must provide certificate of an approved inspection from Metro or Riverview Fire Department. Initial\_\_\_\_  
Date\_\_/\_\_/\_\_\_\_
5. Provide lease agreement or ownership papers of space to be occupied. Initial\_\_\_\_ Date\_\_/\_\_/\_\_\_\_
6. (Application fee \$25.00) Initial\_\_\_\_ Date\_\_/\_\_/\_\_\_\_
7. Occupancy Permit- \$30.00 Initial\_\_\_\_ Date\_\_/\_\_/\_\_\_\_
8. Business License- Fee Varies depending upon business Initial\_\_\_\_ Date\_\_/\_\_/\_\_\_\_
9. State issued I.D. or Driver's License. Initial\_\_\_\_ Date\_\_\_\_/\_\_\_\_/\_\_\_\_

# BUSINESS OCCUPANCY PERMIT APPLICATION

Occupancy Permit: \$30.00

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

Violation of Ordinance 330 can result in fines or \$10.00 to \$500.00 per day for each day that such violation shall continue.

Company Name: \_\_\_\_\_ Phone #: \_\_\_ - \_\_\_ - \_\_\_\_\_

Company Address \_\_\_\_\_ Fax No: \_\_\_ - \_\_\_ - \_\_\_\_\_

Renter's Name: \_\_\_\_\_ D.O.B. \_\_\_/\_\_\_/\_\_\_ SSN# \_\_\_ - \_\_\_ - \_\_\_\_\_

Renter's Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: ( ) \_\_\_ - \_\_\_ - \_\_\_\_\_ Cell Phone: ( ) \_\_\_ - \_\_\_ - \_\_\_\_\_

Co-Renter's Name: \_\_\_\_\_ D.O.B. \_\_\_/\_\_\_/\_\_\_ SSN# \_\_\_ - \_\_\_ - \_\_\_\_\_

Co-Renter's Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: ( ) \_\_\_ - \_\_\_ - \_\_\_\_\_ Cell Phone: ( ) \_\_\_ - \_\_\_ - \_\_\_\_\_

Landlord's Address \_\_\_\_\_ Phone #: \_\_\_ - \_\_\_ - \_\_\_\_\_

Landlord's City \_\_\_\_\_ Zip Code \_\_\_\_\_

How many employees will you have? \_\_\_ 1-5 \_\_\_ 6-10 \_\_\_ 11-20 \_\_\_ 21+

What is your business registered as? \_\_\_ Sole Proprietorship \_\_\_ LLC \_\_\_ Corp \_\_\_ Other

What is the maximum amount for occupancy for the building? \_\_\_\_\_

ACCORDING TO ORDINANCE, ONLY THE COMPANY LISTED ON THIS OCCUPANCY PERMIT MAY OPERATE AT THIS BUSINESS. IF ANY CHANGES ARE MADE IN THE FUTURE, YOU MUST NOTIFY CITY HALL. THIS REQUEST HAS BEEN APPROVED BY THE CITY OF MOLINE ACRES. THIS PERMIT WILL BE REVOKED IF THE APPLICANT IS FOUND NOT TO BE IN COMPLIANCE WITH THE CITY OF MOLINE ACRES.

I understand the terms and conditions listed in the above box. By signing below, I am agreeing that the information is true and I will comply with all of the city's ordinances.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Personnel Signature

\_\_\_\_\_  
Date

-----FOR OFFICE USE ONLY-----

Inspection approved: \_\_\_/\_\_\_/\_\_\_  
Permit Number: \_\_\_\_\_

Occupancy Permit issued: \_\_\_/\_\_\_/\_\_\_  
Receipt # \_\_\_\_\_ Bus. Lic # \_\_\_\_\_

**City of Moline Acres  
Emergency Contact Information for Business**

**Please Print or Type**

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

**Business Name:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_ **Owner Telephone:** \_\_\_\_\_

**Address of Owner:** \_\_\_\_\_

**Are there any HAZARDOUS CHEMICALS or substances stored on the premises?** \_\_\_\_\_

**If yes what are they and where are they stored (please be as specific as possible):**

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**In Case of Emergency, Contact:**

**Name** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Relationship/Business Position:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Relationship/Business Position:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Relationship/Business Position:** \_\_\_\_\_

**THE CONFIDENTIAL INFORMATION LISTED ABOVE IS FOR EMERGENCY CONTACT ONLY**

# ***BUSINESS REMINDERS***

## ***Quarterly Business License Fee Deadline***



<i><b>Quarter</b></i>	<i><b>Months</b></i>	<i><b>Payment Due by 4:30 pm the last Business Day of</b></i>
<i><b>1<sup>st</sup></b></i>	<i><b>January – March</b></i>	<i><b>April</b></i>
<i><b>2<sup>nd</sup></b></i>	<i><b>April – June</b></i>	<i><b>July</b></i>
<i><b>3<sup>rd</sup></b></i>	<i><b>July – September</b></i>	<i><b>October</b></i>
<i><b>4<sup>th</sup></b></i>	<i><b>October - December</b></i>	<i><b>January</b></i>

***\*BE SURE TO HAVE THE CORRECT FORM FOR THAT YEAR THEY ARE CHANGING UNTIL 2023***

***\*\*ALL Business Licenses have a DEADLINE to renew on:  
December 31<sup>st</sup> annually***

***City of Moline Acres***

***2449 Chambers Road Moline Acres, MO 63136***

***Contact Public Works with questions***

***@ 314-868-2433 X700***

City of Moline Acres  
"City with a Vision"



**DEPARTMENT OF PUBLIC WORKS**  
DIVISION OF BUILDING AND INSPECTION  
DENNIS DESHAY  
PUBLIC WORKS DIR. /CODE ENFORCER

**STATEMENT OF UNDERSTANDING**  
**Between The City of Moline Acres and**

\_\_\_\_\_ **Owner of** \_\_\_\_\_

- 1) I understand that my license must be displayed in a conspicuous place inside my business at all times.
- 2) I understand that I am responsible to know the ordinances of The City of Moline Acres and comply with applicable ordinances.
- 3) I understand that my business license must be renewed annually by December 31<sup>st</sup> for my business to be compliant.
  - a) If a late payment occurs I understand that I will be charged a late fee of \$42 on the 1<sup>st</sup> day of the following month
  - b) Additionally there is an administrative fee of \$25 that will be charged on the 1<sup>st</sup> day of the following month
- 4) I understand that my business \_\_\_\_\_ IS \_\_\_\_\_ IS NOT responsible to pay quarterly license fee tax.
  - a) I must remit payment with fee statement from the city of Moline Acres and Missouri form 53.1
  - b) Fees are due as follows: Quarter 1 due April 30<sup>th</sup> , Quarter 2 due July 31<sup>st</sup> , Quarter 3 due October 31<sup>st</sup> , Quarter 4 due January 31<sup>st</sup> (of the following year)
  - c) Late payments will be charged a late fee of \$42 on the 1<sup>st</sup> day of the following month and \$25 administrative fees may be assessed
  - d) My no tax due form from the state of Missouri is required for business renewal.
- 5) I understand that any delinquent fees, taxes, payments will disqualify my business license from being renewed until all fees are paid and must be paid prior to renewal of my license.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Business Name \_\_\_\_\_ Date \_\_\_\_\_

Signature for City Of Moline Acres \_\_\_\_\_