

City of Lawson, MO  
103 S. Pennsylvania Ave.  
PO Box 185  
Lawson, MO 64062



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# Application for Sunday Sales for Lawson, MO

## 2026-2027

Annual City License valid July 1<sup>st</sup> – June 30<sup>th</sup>

You must provide the City with:

- Certificate of Liability Insurance 600,000+ GA
- Certificate of Workman's Compensation
- "NO TAX DUE" Certificate from the State of Missouri
- A fee of \$300.00

Date of Application \_\_\_\_\_

Type of Organization

- |                                     |                                      |                                       |                                |
|-------------------------------------|--------------------------------------|---------------------------------------|--------------------------------|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Partnership | <input type="checkbox"/> Corporation  | <input type="checkbox"/> LLC   |
| <input type="checkbox"/> LLP        | <input type="checkbox"/> Non-Profit  | <input type="checkbox"/> Governmental | <input type="checkbox"/> Other |

Missouri Tax Number \_\_\_\_\_

Federal ID Number \_\_\_\_\_

Missouri Liquor License \_\_\_\_\_ Sunday Sales \_\_\_\_\_

Description of Business \_\_\_\_\_

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

Trade Name of Business (DBA) \_\_\_\_\_

Physical Location \_\_\_\_\_

(NOT A PO BOX) \_\_\_\_\_

BUSINESS PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_

MOBILE PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_

Contact Person \_\_\_\_\_ Contact Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Contact Email \_\_\_\_\_ Contact FAX ( ) \_\_\_\_\_ - \_\_\_\_\_

Applications will not be accepted without acknowledgement of receipt for the following information:



Please indicate with initials that you have read and/or received information on the following:

(Initial)

\_\_\_\_\_ Section 285.530 RSMo. Knowingly employing or hiring unauthorized alien to perform work  
(below)

Applicant is hereby informed that Section 285.530 RSMo. Prohibits any business entity or employer from knowingly employing, hiring for employment, or continuing to employ an unauthorized alien to perform work in the State of Missouri. Furthermore, applicant is informed that if it fails to respond to a request of the Missouri Attorney General to provide identity information regarding any persons alleged to be unauthorized aliens, that the Attorney General is authorized to direct the City of suspend the Applicants business license.

**For Contractor Only:** I am aware of the EPA Lead Law.

**(Initial)**  
\_\_\_\_\_ EPA Renovation, Repair and Painting Program rule: Title 40, Part 745, Subpart E information (EPA-740-F-08-001, March 2008).

Owner/Representative	Signature	_____
	Title	_____
	Date	_____