City of Pleasant Hill

203 Paul Street ~ Pleasant Hill, MO 64080 ~ Phone: 816-540-3135 ~ Fax: 816-987-5141
www.pleasanthill.com

New Business License Packet

(Contractor's License)

[ ] Completed Business License Application (must be signed)

[ ] Certificate of Insurance General Liability – *the City requires a contractor to provide the City with a certificate of General Liability Insurance.*

[ ] Certificate of Workers Compensation Insurance or Notarized Affidavit of Exemption
**The form is in this packet, for additional information or for an additional form it can be found at http://labor.mo.gov/DWC/Forms/WC-134-AI.pdf*

[ ] Certificate of "No Tax Due" (This is a requirement of the State of MO – we are not allowed to issue any license without this document **if you are making retail sales**.)
**This certificate can be obtained at http://dor.mo.gov/business/sales/notaxdue/*
The certificate must be obtained within the last ninety (90) days.

[ ] Completed Commercial Property Emergency Notification for the Pleasant Hill Police Department
**You are only required to provide this information if you have a commercial building inside the City Limits of Pleasant Hill.*

[ ] Utility deposit of $100.00 is required to activate a water/sewer service
**Not applicable unless you are operating in a store front with municipal utilities*

[ ] Copy of Master's License – Applicable to ALL Electricians, Plumbers and HVAC technicians
**We will accept a copy of a master license or a copy of your business license from Lee's Summit, Independence or Kansas City, MO*

[ ] Business License Fee
**Our Business license year is July 1 to June 30. The fee is $25.00 for the company (which includes one (1) owner) and $5.00 for each additional employee or partner that will be working inside the City Limits. If you are opening your business at a different time than during the renewal period the fee schedule is as follows:*

After July 1 and prior to Sep. 30	100% of yearly fee
On or after Oct. 1 and prior to Dec. 31	75% of yearly fee
On or after Jan. 1 and prior to Mar. 31	50% of yearly fee
On or after Apr. 1 and prior to June 30	25% of yearly fee

** For your convenience an application for the Pleasant Hill Chamber of Commerce has been included in this packet. For additional information on the Chamber of Commerce you can visit their website at www.pleasanthillmochamber.com.*

If you have any questions or need any additional information please contact Pleasant Hill City Clerk, Nici Wilson. She can be reached at (816) 540-3135 or at niciw@pleasanthill.com.

City of Pleasant Hill, Missouri

203 Paul Street * Pleasant Hill, MO 64080 * Ph: (816) 540-3135 * Fax: (816) 987-5141

BUSINESS LICENSE APPLICATION

Date:					
Name of Business:					
Address:					
Mailing Address: *If different than physical address					
City:		State:		Zip Code:	
Phone No.		Alternate Phone No.			
Contact Name:		No. of Employees			
Type of Work:				*i.e: framing, general, electrician, antique shop, restaruant	
MO Tax I.D. No.:				*Use social security number if your company does not have a TIN.	
Signature:					

***Fee:** $25.00 for the owner and $5.00 for every employee working within the City Limits of Pleasant Hill

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 to suspend the Applicant's business license.

FOR OFFICE USE ONLY:			
OCCUPANCY INSPECTION COMPLETE	YES [ ]	NO [ ]	N/A [ ]
CERTIFICATE OF WORKMANS COMP.	YES [ ]	NO [ ]	N/A [ ]
MASTERS LICENSE: ELECT, PLMBG, HTG & COOLING	YES [ ]	NO [ ]	N/A [ ]
EXPIRATION DATE:	_____		
AMOUNT: ($25/COMPANY (1 OWNER) $5 PER EMPLOYEE)	_____		
CLERK:	_____		

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).

Pleasant Hill
Chamber of Commerce

Membership Application **Renewal: _____** **New Member: _____**

Company Name:	**# of Employees:**
Contact Person:	**Title:**
Physical Address:	**Mailing Address:**
Phone:	**Fax:**
Email Address:	**Website:**
Business Category: (i.e Yellow Page Classification)	**Years In Business:**
Signature:	**Date:**

In order to serve you better, we'd like to know what Chamber benefits are most important to your business. Please rank the following categories, (*with 1 being the highest*), in order of importance to your business:

____Business Assistance & Advice ____Professional Development/Training ____Business News

____Marketing/Advertising Opportunities ____Networking/Generating New Business ____Member Discounts

____Directory Listings/Phone Referrals ____Community Involvement & Support ____Business Advocacy

____Other:_____

MEMBERSHIP DUES
Dues are Based on the number of employees

1 – 5	Employees	$80.00
6 – 10	Employees	$100.00
11 – 15	Employees	$150.00
16 – 24	Employees	$200.00
25 +	Employees	$250.00

RETURN TO:
Pleasant Hill Chamber of Commerce
P.O. Box 32
Pleasant Hill, Missouri 64080
816-987-2595
www.pleasanthillmochamber.com

Monthly business meetings/lunch are held at noon on the third Tuesday of the month.

City of Pleasant Hill, Missouri
POLICE DEPARTMENT

203 Paul Street
Pleasant Hill, MO 64080

(816)540-9109
FAX (816)987-9113

Robert L. Driscoll
Chief of Police

ATTN: Facility Manager/ Owner

In order that we may notify you immediately if an emergency arises on your property 24 hours per day, it is imperative that we have on file the current names, addresses, home and cell phone numbers (if applicable) of at least three members of your company or organization who are responsible individuals **WITH KEYS** or other access to the property. It is important that we have exact addresses of each site, which your company may have in the city limits of Pleasant Hill or the Pleasant Hill Fire District. As in years past, we are also requesting that you list any hazardous materials that may be stored on your property. Include copies of your Material Safety Data Sheets on each hazardous material, if available.

Enclosed you will find a blue **NOTIFICATION OF EMERGENCY** form. Please print or type the information requested on the form. **It is imperative that this information be complete and accurate.** In addition you may bring, fax (816-987-9113) or mail the form to:

Pleasant Hill Police Department
Emergency Communications Center
C. O. Teresa Rogers
203 Paul Street
Pleasant Hill, MO 64080

These forms will be used to enter the information in our Computer Aided Dispatching System, so that it will be available to Emergency Dispatchers 24 hours per day. This information is accessible to Law Enforcement personnel only. Information that is gathered is considered strictly confidential and shall not be disseminated outside of our agency.

This information will be re-requested each year to insure that our records are current. However, if changes in your callout personnel do occur throughout the year, we would urge you to notify us with the changes.

Thank you in advance for your prompt attention to this important matter. Don't hesitate to call if you have any questions or comments, as we are striving to provide quality service to the businesses and citizens of Pleasant Hill.

Sincerely,

Sgt. Gary Bagby

PLEASANT HILL, MISSOURI POLICE DEPARTMENT
E-911 EMERGENCY COMMUNICATIONS CENTER

COMMERCIAL PROPERTY EMERGENCY NOTIFICATION

BUSINESS NAME:	BUSINESS PHONE:	FAX PHONE:
PHYSICAL ADDRESS:	MAILING ADDRESS: (Include CITY, STATE, ZIP)	
ALARM COMPANY:	ALARM CO. PHONE NUMBER:	

OWNER NAME:	PHONE:	Cellular	ADDRESS:
FACILITY MANAGER:	PHONE:	Cellular	ADDRESS:
RESPONSIBLE PERSON WITH KEY:	PHONE:	Cellular	ADDRESS:
RESPONSIBLE PERSON WITH KEY:	PHONE:	Cellular	ADDRESS:
RESPONSIBLE PERSON WITH KEY:	PHONE:	Cellular	ADDRESS:
RESPONSIBLE PERSON WITH KEY:	PHONE:	Cellular	ADDRESS:
RESPONSIBLE PERSON WITH KEY:	PHONE:	Cellular	ADDRESS:

HAZARDOUS MATERIALS ON PROPERTY

COMPRESSED GAS CYLINDERS	*ANY FUELS*	*ACIDS*	*EXPLOSIVES*	*VICIOUS ANIMALS*

RETURN COMPLETED FORM TO:
Emergency Communications Center
Pleasant Hill Police Department
203 Paul Street
Pleasant Hill, MO 64080
Dispatch (816)540-9109
Fax (816)987-9113