



City of Kansas City, Mo.  
 Neighborhoods and Housing Services Department  
 Regulated Industries Division  
 635 Woodland Ave., Suite 2101  
 Kansas City, MO 64106  
 (816) 513-4561

# Cigarette License Application

Applicant's name \_\_\_\_\_

DBA business name \_\_\_\_\_ Phone \_\_\_\_\_

Business address \_\_\_\_\_  
Street City State ZIP

Applying as a  sole owner  corporation  limited liability company  partnership

1. What is the business type?  Wholesale Dealer  Retail Dealer

2. Will the business be selling cigarettes from vending machines?  Yes  No **If yes**, how many vending machines? \_\_\_\_\_

3. Owner's name \_\_\_\_\_ Mobile phone \_\_\_\_\_

E-mail address \_\_\_\_\_ Work phone \_\_\_\_\_

Name of Designated Agent (or person that can act on owners behalf) \_\_\_\_\_

E-mail address \_\_\_\_\_ Mobile phone \_\_\_\_\_

----- If the business is a **corporation**, complete this section -----

4. Name of corporation \_\_\_\_\_

State of incorporation \_\_\_\_\_ Date of incorporation \_\_\_\_\_

----- If the business is a **limited liability company**, complete this section -----

7. Name of limited liability company \_\_\_\_\_

State of organization \_\_\_\_\_ Date of organization \_\_\_\_\_

----- If the business is a **partnership**, complete this section -----

9. List names of general and limited partners, and the number of units owned by each (attach additional list if necessary) \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I agree to promptly report any changes in the information provided with this application to the director of the Neighborhood and Community Services Department.

I will at all times permit the entry of any officer or investigator who may have legal authority of the purpose of inspection or search, and will permit the removal of all things and articles that may be in violation of the ordinances of the City of Kansas City, Mo., and the laws of the State of Missouri.

I have familiarized myself with the provision of Chapters 20 and 50, code of general ordinances of the City of Kansas City, Mo., and agree to comply with these provisions in the conduct of this business and I will not violate any of the ordinances of the city, the laws of the state or the laws of the United States in the conduct of the business.

I, \_\_\_\_\_, being of lawful age and duly sworn upon my oath, declare that I have read the application and fully understand same and that I know the contents thereof and the answers and statements contained therein and the same are true.

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

\_\_\_\_\_  
 Date

