



CITY OF FARMINGTON
110 W. COLUMBIA
FARMINGTON, MISSOURI 63640
573-756-1701

FINANCIAL INSTITUTION
BUSINESS LICENSE APPLICATION
2017

BUSINESS NAME _____

BUSINESS ADDRESS _____

BUSINESS PHONE _____

CONTACT NAME _____

CONTACT PHONE # _____

TO THE CITY OF FARMINGTON:

I _____ the undersigned, hereby make application for license authorizing my firm to engage in such business in the City of Farmington and agree to pay the license charge as set forth.

\$100.00 PLUS \$10.00 FOR EACH ONE MILLION DOLLARS ON DEPOSIT AS OF THE 31ST DAY OF DECEMBER OF THE PRECEDING YEAR.

I, _____, being duly sworn, do state upon my oath that I am the _____ of
Title

_____ Business

Located at _____, Address

Farmington, Missouri, and that the deposits as of the 31st day of December of the preceding year were \$ _____.
Receipts

Signature

Date