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Checklist of Required Documentation Change in Managing Officer Application

	Managing Officer's personal/business wastewater paid receipts.
	Managing Officer's current paid real & personal property tax receipts as of December 31, of the applicable year from the City of Warrensburg, Johnson County, Missouri, or if not applicable, in any other town, village, city or county within the State of Missouri.
	Property owner's current paid real & personal property tax receipts as of December 31, of the applicable year pertaining to the business location. <i>(if change falls after January 1 of applicable year)</i>
	Certificate of "no sales tax due" verifying that all state & local sales taxes are paid to date. <i>(not more than 90 days old)</i> Missouri Department of Revenue, Phone: 573-751-3505, Web: http://dor.mo.gov/
	Missouri "certificate of good standing" for all corporations. <i>(not more than 90 days old)</i> Missouri Secretary of State, Phone: 573-751-4153, Web: www.sos.mo.gov
	Managing Officer's proof of voter registration within the State of Missouri.
	FBI Fingerprint based criminal records check. Code will be provided for submission to Missouri State Highway Patrol , Phone: 573-526-6153, Web http://www.mshp.dps.missouri.gov/MSHPWeb/Root/index.html
	Completed Managing Officer Appointment form.
	Missouri Liquor Control change of Managing Officer approval documentation.
	Scheduled inspection time for Fire & Building Inspection.

CITY POLICE DEPARTMENT INFORMATION

Granted: _____ Denied: _____

Investigating Officer Signature & Date: _____

Application to Change Managing Officer

Business Structure _____ **Current License Numbers:** _____

<input type="checkbox"/> CORPORATION	<input type="checkbox"/> LIMITED PARTNERSHIP	<input type="checkbox"/> LIMITED LIABILITY COMPANY
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Date of Application: _____ Missouri Sales Tax #: (include current certificate of no tax due) _____

Legal Name of Entity: _____ Business Phone#: _____

Doing Business As: _____

Physical Location Address: _____

City – State – Zip Code: _____

Mailing Address (if different from above): _____

City – State – Zip Code: _____

If applying as a Corporation, LLC or Partnership, State Missouri Secretary of State file #: _____

Attach certificate of Good Standing *(not more than 90 days old)*

Information for New Managing Officer			
Last Name:		First Name:	Middle Initial:
Date of Birth:	Place of Birth:	Social Security #:	Sex: Male: _____ Female: _____
Home Phone #:	Drivers License #:	E-mail Address:	
Current Address:			
City – State – Zip Code:			
City Town or Village where the Sole Owner, Managing Officer of Partner pays taxes:			
New Managing Officer is registered to vote in the following:			
Precinct:	City:	Ward:	County:
Have you ever used another name? Yes: _____ No: _____ If yes, list first & last name/names: _____			
Managing Officer Named must be a person in the applicant's employ, either as an officer or an employee who is vested with general control and superintendence of a whole of a particular part of, the applicant's business at a particular place.			
Signature of New Managing Officer:			Date:
CITY INFORMATION	License #'s:		
	Date Received:		

MANAGING OFFICER APPOINTMENT FORM

Date _____

_____, has appointed
(Name of Corporation or Organization)

_____ as Managing
(Name of Managing Officer)

Officer for the corporation/organization. The Managing Officer is a person in the licensee's employ, either as an officer or as and employee who is vested with the general control and superintendence of a whole, or a particular part of, the licensee's business in accordance with State Rules and Regulation 11 CSR 70-2.30(7)

Officer of the Organization
(Signature & Date)

Affidavit (must be Notarized) *Notary available at City Hall*

The applicant understands that false answers are grounds for denial of a license.

The applicant understands that if any statements or answers made herein are untrue and the license herein applied for is granted, such license may be revoked or suspended.

All license applicants must provide a copy of their approved Missouri State Liquor license in order to approve/process the local licenses.

No license will be issued and the establishment must not sell alcohol until State approval documentation is provided to the City.

This license is for use in connection with the operation of a business located at _____, Warrensburg, Missouri, and known as _____. The undersigned is (a General Partner) and/or (the Managing Officer) of the license.

The license covenants to fully comply with all the provisions of the City Ordinances, as amended, pertaining to Liquor Licenses. The undersigned states that he/she is a United States Citizen, a Qualified Voter and Taxpaying Citizen, and is not currently obligated in any way to the City of Warrensburg.

Signature of New Managing Officer:	Date:
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NOTARY INFORMATION

On the _____ day of _____, 20____, appeared before me _____, to me personally known, and who did, upon their oath swear and affirm that they executed the above and foregoing document as their free act and deed, and that all information contained therein is true and complete to their best knowledge and belief.

Notary Public Embosser or Black Ink Rubber Stamp	State of _____		County _____
	Subscribed and Sworn Before Me, This Day of _____ Year _____		
	Notary Public Signature	My Commission Expires	Use Rubber Stamp in Area Below
	Notary Public Name (typed or printed)		