



Finance Department
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CITY OF ROLLA BUSINESS LICENSE UPDATE

FORMER INFORMATION

BUSINESS NAME _____
MAILING ADDRESS _____
LOCATION ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____

NEW INFORMATION

BUSINESS NAME _____
MAILING ADDRESS _____
LOCATION ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
PRINT OWNER NAME _____

SIGNATURE _____ **DATE** _____

FOR OFFICE USE ONLY

_____ ZONING & DATE APPROVED
_____ FIRE
_____ BLDG/ELECTRIC
_____ NO INSPECTION NEEDED
_____ FEE PAID
_____ RECEIPT NUMBER