#### CITY OF KANSAS CITY, MISSOURI FINANCE DEPARTMENT, REVENUE DIVISION Web Site: http://www.kcmo.org/revenue

**RD-103A** (Rev. 09/10)

# Instructions for Filing Business License Application Flat Rate

## Phone (816) 513-1135 Fax (816) 513-1221

Businesses whose license fees are based on a flat rate are required to complete form RD-103 for the current year to obtain a business license. To avoid delays in processing, use forms provided or forms approved by the Revenue Division of the City of Kansas City, MO.

### **General Instructions**

- 1. If you need changes or corrections made to the forms sent to you, please contact the Business License Section at (816) 513-1135. The following information must be entered on this form: Taxable period (calendar year only) FEIN/SSN
  - - Missouri Sales Tax Number (required for retail sales)

SIC Code (if known) Business name and location

- Mailing address
- Date business started (if new business in the previous year) Table number used
- All businesses located in Kansas City, Missouri must obtain a Zoning Clearance prior to the issuance of a business license. A 2. change in address or relocation within Kansas City, Missouri city limits requires the issuance of a new zoning clearance prior to issuance of a business license. All required clearances must be attached to the Business License Application. For information on zoning requirements, contact the Development Services, Permit Division, 5th floor, City Hall, (816) 513-1500. Construction businesses must attach a copy of their certificate for workers' compensation coverage or a copy of Missouri Form WC-65-B, if exempted from coverage. Other clearances may be required.
- The following may delay issuance of your business license: 3.

Failure to furnish required information

- Incorrect payment amount (i.e., failure to include penalty)
- Calculation error Failure to attach proper clearances
- Failure to pay other city taxes •
- Failure to use forms approved by the Revenue Division •
- No tax due letter from STATE of MISSOURI (if applicable)
- 4. When and where to file:

Form RD-103 is due prior to March 1 of each year for businesses operating the full year. New or first time Kansas City, Missouri Business License purchasers must only file the RD-103 prior to operation. Additionally, a new/first time Business License purchaser must complete and submit a Registration Application form RD-100 with the RD-103. Tax returns may be filed in person with the Revenue Division, 414 E.12th Street, 2<sup>nd</sup> Floor-West, Kansas City, Missouri.

Mail completed return and check to Revenue Division, P.O. Box 804103, Kansas City, MO 64180-4103.

5. Penalty provisions:

A late charge of 10% of the amount due shall apply on March 1 and 2% of the original fee shall apply the first of each month thereafter (maximum 30%) until paid in full. New businesses that have not filed are subject to the 10% penalty on the 61<sup>st</sup> day of business and to the additional 2% penalty each month thereafter.

New businesses operating less than a full twelve (12) months may prorate fees over \$5.00 (if applicable). 6. Computation: Annual fee divided by 12, multiplied by the number of months in operation (partial month equals 1).

To determine fee due:

For SIC Code entered on form RD-103, locate corresponding table number in code table. Enter the table number used on Form RD -103, then go to specified fee table. Note: Taxi, tow truck, auto, livery, etc., use lines 1a and 1b to compute fee for additional units. Form RD-103 Instructions-Flat Rate

Line 1.	aEnter number of units (if not applicable, enter 1).	
	b Enter number of units for partial year, multiplied by number of months, and divided by 12.	
	cEnter sum of lines 1a and 1b. If additional units are being licensed for partial year, check line 6.	
	d Enter qualifier number from fee table.	
	e Enter flat rate fee from fee table or multiply total units by rate per unit.	
Line 2.	If filed after March 1 of the current year, calculate penalty and enter amount due.	
Line 3.	Enter annual fee due (sum of lines 1e and 2), prorate if applicable.	
Line 4	Enter amount paid.	
Line 5	Check if this is an amended return (lines 1a and 1b must be completed)	

eck if this is an amended return (lines 1a and 1b must be completed). \_ine 5. ATTACH ALL REQUIRED CLEARANCES

## **RD-103 CODE TABLE**

SIC CODE	TABLE	CLEARANCE		SIC CODE	TABLE	CLEARANCE	]	SIC CODE	TABLE	CLEARANCE
7510	28			59940	15			79111	20	3
7830	109	1		62892	11			79221	18	
17950	18	2		63110	79			79222	19	
40110	26			63610	79			79411	15	
40111	18	3		70210	16			79480	100	3
41110	112			72511	48			79930	75	3
41190	72	3		72611	15			79931	92	3
41191	52			72612	24			79932	101	
41210	72	3		72992	16			79993	124	3
41310	112	3		72993	18	6		79994	124	3
42310	42	3		72994	119	3		79995	75	3
45810	16			72995	123	3		79996	20	3
47241	18			73190	66			79999	123	3
47890	16			73191	112			80620	20	
48220	7			73591	16			80690	20	4
50311	61			73592	18			82491	113	5
50521	16			73593	23	3,7		82492	19	1,5
51480	53			73594	26			82493	91	
51420	128			73595	84			84120	20	3
53991	18			73596	14			84220	20	
54992	52	4		73810	81	5		87110	127	
54993	52	4		73811	126	5		87120	121	
54994	53	4		73812	82	5		87130	16	
54995	74	4		73892	16			87210	120	
55991	16			73893	16			99990	113	3
59321	25	3,5		73894	20			99993	13	
59630	78			73895	20			99997	89	3,6
59631	3			73896	25					
59633	15			73897	26					
59634	18	4		73898	89					
59637	112			75490	42A	3				
59638	78A			76992	106	4				
59891	16			78320	56	3				
					Clearance	Legend				
	1 = Certificate of Liability Insurance (513-1135) 5 = Police Department (234-5000)									
	$2 = \text{Development Services (513-1500)} \qquad \qquad 6 = \text{Animal Control (513-9800)}$									
3 = Business License Section (513-1135) $7 =$ Location Report (513-1135)										
4 = Health Department, Food Service (513-6315)										

All new businesses and businesses that have relocated are required to obtain zoning clearance prior to issuance of a business license. For zoning information, call 513-1500. Construction businesses must also attach a copy of their certificate for workers' compensation coverage or a copy of Missouri Form WC-65-B, if exempted from coverage.

7	-	eipts, use line 1	
	Minimum	Maximum	Flat Fee
	\$0.00 \$50.000.00	\$50,000.00	\$625.00 \$1.250.00
	\$50,000.00	None	\$1,250.00
8	Use line 1e	FLAT FEE =	\$3.00
11	Use line 1e	FLAT FEE =	\$100.00
13	Use line 1e	FLAT FEE =	\$15.00
14	Use line 1e	NUMBER O	
	AMUSEME	NT DEVICES	X \$1.50
15	Use line 1e	FLAT FEE =	\$25.00
16	Use line 1e	FLAT FEE =	\$32.00
18	Use line 1e	FLAT FEE =	\$62.50
19	Use line 1e	FLAT FEE =	\$75.00
20	Use line 1e	FLAT FEE =	\$125.00
23	Use line 1e	FLAT FEE =	\$250.00
24	Use line 1e	FLAT FEE =	\$312.00
25	Use line 1e	FLAT FEE =	\$375.00
26	Use line 1e	FLAT FEE =	\$625.00
28	Use line 1e	FLAT FEE =	\$1250.00
42	Use line 1a		
	NBR OF TRU	UCKS X \$9.50	
42A	Use line 1a		
	NBR OF TO	W TRUCKS X	\$25.00
48	Use line 1a		
	NBR OF CH	AIRS OR SEA	TS X \$3
52	Use line 1a		
	NBR OF VE	HICLES X \$1	8.75
53	Use line 1a		
		HICLES X \$3	
56		seats, use line	
	and put qualit	fier '1' on line 1	d
			g Sales Tax **
	Minimum \$0.00	Maximum \$0.15	Flat Rate \$50
	0.16	0.25	\$30 100
	0.26	0.25	150
	0.36	0.50	200
	0.51	1.49	300
	\$1.50	none	\$750

56	For 2000 to 3	8000 seats, use lin	ne 1e				
cont.	and put qualifier '2' on line 1d						
	** Price Per Seat - Excluding Sales Tax **						
	Minimum	Maximum	Flat Rate				
	\$0.00	\$0.15	\$50				
	0.16	0.25	100				
	0.26	0.35	150				
	0.20	0.50	200				
	0.51	1.49	400				
	\$1.50	none	\$750				
		0 seats, use line 1	e				
		fier '3' on line 1d					
		Seat - Excluding					
	Minimum	Maximum	Flat Rate				
	\$0.00	\$0.15	\$50				
	0.16	0.25	100				
	0.26	0.35	150				
	0.36	0.50	200				
	0.51	1.49	500				
	\$1.50	none	\$750				
	l · · · ·						
61	Use line 1a	NBR OF CARS					
		(\$30 minimum)	)				
66	If handbill is	issued yearly, us	e line				
	1a and put qu	alifier '1' on line	1d				
	Flat Rate $=$ \$						
			se line				
	If handbill is issued weekly, use line 1a and put qualifier '2' on line 1d						
	NBR of WEEKS x \$12.50						
	If handbill is issued daily, use line						
		1a and put qualifier '3' on line 1d					
	NBR of DAYS x \$3						
	If handbill for local merchant, use line						
	1a and put qualifier '4' on line 1d						
	Flat rate $=$ \$1						
72	Use line 1a						
12		HICLES X \$12.5	0				
74		vn vehicles, use li	ne 1a				
		fier '1' on line 1d					
	NBR VEHIC						
		n vehicles, use lin	ne la				
		fier '2' on line 1d					
	NBR VEHIC	LES X \$18.75					
75	Use line 1a						
	NBR OF DE	VICES X \$15					
78	Use line 1a						
70		HICLES X \$32					
78A	For yearly by	reinase usa lina 1	a and				
70A		isiness, use line 1	a allu				
	put qualifier						
	Flat Rate =		1.				
		business, use line	: 1a				
		fier '2' on line 1d					
	NBR OF MC	ONTHS X \$6.25					

79	For multiple line insurance, use line
	1e and put qualifier '1' on line 1d
	Flat Rate = \$200
	For fire insurance, use line 1e and
	put qualifier '2' on line 1d
	Flat Rate = $$200$ .
	For casualty insurance, use line 1e
	and put qualifier '3' on line 1d Flat Rate = \$100
	For life insurance, use line 1e and
	put qualifier '4' on line 1d
	Flat Rate = $$100$
	For other insurance, use line 1e and
	put qualifier '5' on line 1d
	Flat Rate = \$100
81	Use line 1a, enter number of persons
	For 0 to 5 persons, Flat Rate = $$125$
	For over 5 persons, Flat Rate = \$250
82	Use line 1a, enter number of persons
	For 0 to 10 persons, Flat Rate = \$95
	For 11 to 20 persons, Flat Rate=\$187.50
	For over 20 persons, Flat Rate=\$312.50
84	Use line 1e FLAT FEE = $$250.00$
89	Use line 1e FLAT FEE = $$37.50$
91	Use line 1a, enter number of aircraft
	For 0 to 20 aircraft, Flat Rate = $32$
	For over 20 aircraft, Flat Rate = \$62.50
92	Use line 1a NBR OF AMUSEMENT
	DEVICES x MONTHS x \$1.50
100	Use line 1e
	Flat Rate = \$52.50 PLUS
	NBR OF DAYS x \$12.50
101	Use line 1a
	NBR OF MACHINES X \$75
106	Use line 1a, enter number of vehicles
	NBR OF VEHICLES X \$100
109	Use line 1e FLAT FEE = $$50.00$
112	Use line 1e FLAT FEE = $$1.00$
113	Use line 1e FLAT FEE = \$10.00
119	Use line 1e FLAT FEE = \$300.00
120	For 1 resident accountant, use line
120	1e and put qualifier '1' on line 1d
	1 or less assoc accountants,
	Flat Rate = \$50
	1 to 3 assoc accountants,
	Flat Rate = \$75
	3 to 6 assoc accountants,
	Flat Rate = $$125$
	6 or more assoc accountants, Flat Rate = \$150
	$1 \text{ at twice} = \psi 150$

120	For 2 or more resident accountants, use						
cont.	line 1e and put qualifier '2' on line 1d						
	Flat Rate = \$150						
121	For 1 resident architect, use line 1e						
121	and put qualifier '1' on line 1d						
	1 or less draftsmen or associates,						
	Flat Rate = $$50$						
	1 to 3 draftsmen or associates,						
	Flat Rate = $$75$						
	3 to 6 draftsmen or associates,						
	Flat Rate = $$125$						
	6 or more draftsmen or associates,						
	Flat Rate = $$150$						
	For 2 or more resident architects, use						
	line 1e and put qualifier '2' on line 1d						
	Flat Rate = $$150$						
123							
123	For itinerant, use line 1e and put qualifier '1' on line 1d						
	Flat Rate = $$25$ PLUS NBR of						
	attendants or operators $x$ \$12.50						
	•						
	For fixed location, use line 1e and						
	put qualifier '2' on line 1d Flat Rate = \$25 PLUS NBR of						
	attendants or operators $x $ \$6.25						
	· · · · · · · · · · · · · · · · · · ·						
124	Use line 1a						
	NBR OF POOL TABLES X \$10.00						
126	Use line 1e $FLAT FEE = $50$						
127	For 1 resident engineer, use line 1e						
	and put qualifier '1' on line 1d						
	1 or less assoc engineer or draftsmen,						
	Flat Rate = $$50$						
	1 to3 assoc engineer or draftsmen,						
	Flat Rate = $$75$						
	3 to 6 assoc engineer or draftsmen,						
	Flat Rate = $$125$						
	6 or more assoc engineer or draftsmen,						
	Flat Rate = $$150$						
	For 2 or more resident engineers, use						
	line 1e and put qualifier '2' on line 1d						
	Flat Rate = $$150$						
128	Use line 1a enter number of stores						
	Use Line 1e number of stores x \$650						