



City of Webb City * PO Box 30 * 200 S. Main Street * Webb City, MO 64870

Office of Administration 417-673-4651 / Fax 417-673-8228

Application for Contractor License

Business Name: _____

Business Address: _____
(Street Address) (Suite Number)

(City) (State) (Zip)

Mailing Address (If different from above): _____
(Street Address) (Suite Number)

(City) (State) (Zip)

Phone Number: _____ **Cell Number:** _____

Fax Number: _____

Owner's Name: _____

Owner's Address (If different from above): _____
(Street Address)

(City) (State) (Zip)

Type of Contractor: _____

License Fee: _____

Signature

Date

OFFICIAL OFFICE USE ONLY

- _____ Application
- _____ Payment – Based on type of License issued
- _____ General Liability Insurance (\$100,000.00 Minimum)
- _____ Workman's Compensation Insurance / Waiver
- _____ License Issued # _____

Procedure for Contractor's License

Before any bids are awarded or any contractor does any work for the city of Webb City, the Contractor must have a city license. To obtain a Contractor's license, a copy of the General Liability Insurance and Workmen's Compensation Insurance must be on file. Specific information is noted below...

Every person desiring to obtain a contractor's license such as is required by this article to engage in contracting work in this city shall make application to the city according to the following procedure:

- (a) Present to the city clerk an application, upon a form prescribed and approved by the city for a contractor's license;
- (b) Tender to the city clerk, the application and the license fee in the amount as set forth.
- (c) In conjunction with his application, and before the application shall be acted upon, submit to the City Clerk proof of having obtained comprehensive general contractor's bodily injury liability insurance providing for a limit of not less than one hundred thousand dollars (\$100,000.00) for all damages arising out of bodily injuries to or for the death of one (1) person, and subject to that limit for each person, a total limit of three hundred thousand dollars (\$300,000.00) for all damages arising out of bodily injuries to or death of two (2) or more persons in any one (1) accident, and comprehensive general contractor's property damage liability insurance providing for a limit of not less than fifty thousand dollars (\$50,000.00) for all damages arising out of injury to or destruction of property in any one (1) accident, and subject to that limit per accident, a total or aggregate limit of three hundred thousand dollars (\$300,000.00) for all damages arising out of injury to or destruction of property during the policy period. This insurance must cover below-grade damage and be in full force during the entire construction process; and further be with a company approved by the city; and such insurance shall cover the licensee and all employees of the licensee who may perform work with the city under the provisions of this article;
- (d) Each contractor must provide a copy of their Worker's Compensation Insurance, or fill out the Missouri Affidavit of Exemption. The Exemption Form must also be notarized.
- (e) Failure to comply with any of the requirements of this section at any time during the term of the license shall result in immediate forfeiture of such license.

License Fees

General Contractor	\$100.00
Electrical Contractor	50.00 (MUST have a Master Electrician with Test Scores on file with city)
Plumbing Contractor	50.00
Insulating Contractor	25.00
Roofing Contractor	25.00
Siding Contractor	25.00
Painting Contractor	25.00
Masonry Contractor	25.00
Landscaping Contractor	25.00
Tree Trimming Contractor	25.00
Heat/Air Conditioning Contractor	50.00
Paving Contractor	75.00
All Other Contractors	50.00



City of Webb City ♦ PO Box 30 ♦ 112 W. Broadway ♦ Webb City, Missouri 64870

Office of Community Development ♦ 417-673-1154 ♦ Fax – 417-673-2856 ♦
ebraker@webbcity.org

Dear Webb City Business Owner,

Thank you so much for your continued dedication to our community by choosing Webb City as the location for your business. In an effort to improve our business retention program, we are asking for a little more detailed contact information from our business license holders.

By providing us with your most current contact information, we are able to provide many different benefits to our Webb City companies. Other than being able to contact you in the most efficient ways possible, we will now be able to share important information, events and updates about your business on our social media outlets. (All social media outlets will also be linked to our new website that is scheduled to be revealed in late November).

In addition to making sure that all of your basic business license information is correct, we ask that you please provide us with the additional information requested below:

Main contact email address: _____

Company website address: _____

Company Facebook address: _____

Any other social media presence (circle all that apply):

Instagram Snapchat Twitter

Thank you very much for your assistance in this matter. Your company is just another reason why “We Love it Here” in Webb City, Missouri.

Sincerely,

Erin B. Turner
Office of Community Development

Webb City Area Chamber of Commerce

112 W Broadway
P.O. Box 287, Webb City, MO 64870
Telephone: 417-673-1154 Fax: 417-673-2856
John Patterson, President
Gwen Allen, Director of Membership
LeeAnn Crider, Administrative Assistant
www.webbcitychamber.com

2020 Membership Application

Membership effective through the calendar year –December 31, 2020

Date Application Completed _____

Who referred you to the Chamber? _____

Business Name _____

Published Address _____

Mailing Address _____

Contact Person _____ Telephone _____

E-mail _____ Fax _____

Website _____

Business Category _____

Investment Category & # of Employees _____

What do you hope to get out of your Chamber investment? _____

Are you interested in serving as a volunteer on a Chamber committee? Yes No

Main Reason for joining the Chamber:

Networking Advertising & Marketing Web Presence

I am interested in having a ribbon cutting

Employee contacts e-mails for announcements:

Name _____ E-mail _____

Name _____ E-mail _____

Name _____ E-mail _____



*Our mission is to expand, retain and advocate for our economic base,
support our educational programs and promote the quality of life in our community.*

Webb City Area Chamber of Commerce

2020 Membership Investment Schedule

Investments are for a calendar year and may be paid annually, semi-annually or quarterly.

Individuals *	\$55
Non-Profit & Public Institutions	\$150
Churches	\$150
Realtors	\$150
Professionals	\$275
Utilities, Health Centers & Financial Institutions	\$550
Retail, Real Estate Agencies, & Manufacturing:	
Less than 10 employees	\$150
11 to 25 employees	\$275
26 to 50 employees	\$425
More than 50 employees	\$550

*Individuals are those not currently affiliated with any business.



*Our mission is to expand, retain and advocate for our economic base,
support our educational programs and promote the quality of life in our community.
www.webbcitychamber.com*