LANDLORD LICENSE

APPLICANT (all fields required)
When a property is owned by a corporation or LLC, an associated natural person must be listed in this section.

OWNER OR SHAREHOLDER NATURAL NAME

CORPORATION, LLC, OR ORGANIZATION (if applicable)		DRIVERS LICENSE #

OWNER ADDRESS (cannot be PO Box or commercial mailing service)	CITY	STATE	ZIP

COUNTY	MOBILE PHONE	EMAIL

AGENT/CONTACT (if different from owner)
A local agent or contact is <u>required</u> if the applicant lives further than 60 miles driving distance from the property.

NAME OF AGENT/CONTACT		DRIVERS LICENSE #

ADDRESS (cannot be PO Box or commercial mailing service)	CITY	STATE	ZIP

COUNTY	MOBILE PHONE	EMAIL

PROPERTY TYPES
Please use the following codes to complete the table below

Type	Code	Definition
Single Family	SF	A structure maintained and used as a single residential dwelling unit.
Garage Apartment	GA	A room or suite of rooms designed as a residence that is located above a residential/commercial garage.
Duplex/Triplex/Quadplex	PL	A multi-family residential unit of up to four residential units in one building.
Upper Story Downtown Apartment	US	A room or suite of rooms designed as a residence that is located in the Historical Downtown Commercial District.
Apartment Building	AB	A large building divided into more than four residential units.

ADDDRESS LISTING (all fields required)
Please see the provided floodplain map or contact David Cowan at Davidc@independenceks.gov or 620-332-2528.
Please attach a schedule if you need additional room

Adress	Unit Type	# of Units	# Bedrooms / Bathrooms per unit	Located in the floodplain? (Y / N)

I affirm by my signature below that I have been provided with and am in compliance with all rental licensing standards outlined in Independence Code of Ordinance Chapter 18 Article XI. I understand that failure to comply with any of these standards and/or conditions shall be adequate grounds for the denial, refusal to renew, revocation, or suspension of my rental dwelling license. I acknowledge that the City of Independence will hold me responsible for the maintenance, management, and any legal actions that may ensue for the above listed rental property. I agree that all correspondence sent from the City of Independence will be mailed to me as the appointed agent/contact person as listed in this section.

I acknowledge that any changes to the names, addresses, and other information concerning the persons on this application must be provided in writing to the City of Independence within ten days.

I authorize the City to publish the information in my application for use by the public as a landlord registry.

                    YES   NO   (circle one)

OWNER
SIGNATURE   _____   Date   _____

AGENT/CONTACT
SIGNATURE   _____   Date   _____

LICENSE FEES	
Initial Application	$30
Annual Renewal	$20
Information Only Update	$0
Total Included: $_____	

PAYMENT OPTIONS	
In person via cash, check, money order, credit card City Hall 120 N. 6th St. Independence, KS 67301 M-Th 8 am - 4 pm Fri 8 am - Noon	**By phone** via credit or debit card information. Your completed application must have been received prior to payment. *MasterCard, Discover, American Express, and Visa* (620) 332-2500 M-Th 8 am - 4 pm Fri 8 am - Noon
By drop box, in a sealed envelope with this application and check payable to the City of Independence included. 410 N. Penn Independence, KS, 67301	**By mail**, with a check payable to the City of Independence 120 N. 6th St Independence, KS 67301

Residential Landlord Occupation License

ADDDRESS LISTING (all fields required)
Please see the provided floodplain map or contact David Cowan at Davidc@independenceks.gov or 620-332-2528.
Please attach a schedule if you need additional room

Adress	Unit Type	# of Units	# Bedrooms / Bathrooms per unit	Located in the floodplain? (Y /