



Rental Registration Program Application

12350 W 87 Street Pkwy
P.O. Box 14888
Lenexa, KS 66285-4888

Phone 913-477-7500
Fax 913-477-7730

Application Date ____/____/____

1. Owner of Record (Corporation see #3 below or Natural Person see #2 below)

Name _____ Date of Birth ____/____/____

Address (PO Box not accepted) _____

City _____ State ____ Zip _____ Phone () _____

Cell Phone () _____ E-Mail Address _____

Signature _____ Title _____

2. Owner's Agent or Manager (Only required if owner lives out-of-state)

Name _____ Date of Birth ____/____/____

Address (PO Box not accepted and must be in Johnson County, KS) _____

City _____ State ____ Zip _____ Phone () _____

Cell Phone () _____ E-Mail Address _____

Signature _____

3. Legal Entity Information (Proof of good standing from the Sec. of State in the state in which the entity is registered is required)

Full Name of Legal Entity _____

Name of Officer or Responsible Party: _____ Date of Birth ____/____/____

Address (PO Box not accepted) _____

City _____ State ____ Zip _____ Phone () _____

Cell Phone () _____ E-Mail Address _____

Signature of Officer or Responsible Party _____

PROPERTY INFORMATION

Property Address	Type of Property (single family, duplex, apartment)	# of Rental Units (if applicable)

Note: If you have additional properties please attach additional pages.



Note:

- A rental license will not be issued until an exterior inspection of the property has been conducted; this may take up to 10 days. If violations are identified, the license may be delayed until corrections are made.
- It is unlawful to rent a property without a rental license.
- Any of the above stated people can accept Notice of Violation and have the legal authority to act for the stated property(s).
- Full payment is required to process an application.
- By signing above, I declare under penalty of perjury that the statements made herein are true and correct.