



RENTAL APPLICATION FORM

APPLICATION FOR RENTAL DWELLINGS
LICENSING YEAR -- JANUARY 1 – DECEMBER 31
MUST BE RENEWED ANNUALLY
Inspection required prior to occupancy

RENTAL ADDRESS _____

OWNER'S NAME _____ TELEPHONE _____

ADDRESS _____

LOCAL AGENT _____ TELEPHONE _____

ADDRESS _____

Because I do not reside in the City of Leawood or the surrounding metropolitan area, I hereby designate _____ as the local agent who is responsible for payment of all licensing fees and penalties, requisite inspections, annual renewal, and general property upkeep as provided in the Property Maintenance Code, Minimum Housing Code, and Rental Inspection Program of the City of Leawood, KS.

LICENSE FEE

1. SINGLE FAMILY..... \$75.00
2. APARTMENT..... \$20.00

Application and annual fee may be sent to:

Rental Inspection Program 4800 Town Center Drive Leawood, KS 66211

I declare under penalty of false statement that to the best of my knowledge and belief all statements herein are correct and true and that the conduct of the business described above is in compliance with the City of Leawood ordinance.

Print name of property owner or owner's agent

Signature of property owner or owner's agent

Date of Inspection _____ Pass _____ Fail _____ Date of Re-Inspection _____