



## Rental Registration Program Application

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

Phone 913-477-7500  
Fax 913-477-7730  
www.ci.lenexa.ks.us

Application Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Owner of Record (Corporation Name/Chief Operating Officer)

Name \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Bus. Phone (    ) \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Fax (    ) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Signature \_\_\_\_\_

### Agent (required if owner lives more than 25 miles from Lenexa)

Name \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Local Phone (    ) \_\_\_\_\_ Bus. Phone (    ) \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Fax (    ) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Signature \_\_\_\_\_

### Operator/Manager (if different than owner/agent)

Name \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Local Phone (    ) \_\_\_\_\_ Bus. Phone (    ) \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Fax (    ) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Signature \_\_\_\_\_

**I declare under penalty of perjury that the statements made herein are true and correct. I also understand if this application is not complete in full, it will be returned to me and a rental license will not be issued. I also understand it is unlawful to rent a property without a rental license and will not be in compliance with Lenexa City Code.**

**PROPERTY INFORMATION**

**SINGLE FAMILY, DUPLEX, TOWNHOUSE – List each individual address**

(Single Family, Duplex, Townhouse)	Rental Property Address	# of Rental Units

**MULTI-FAMILY APARTMENT COMPLEX**

Complex Name	Rental Property Address – (Clubhouse or main office address)	# of Rental Units

**Note: If you have more than 4 multi-family apartment complexes, please attach an additional application form.**

Total fees due: \$ \_\_\_\_\_

- Payment by Check – make check payable to City of Lenexa.
- Payment by Credit Card - Please call City Hall at (913) 477-7500 to pay by credit card

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**OFFICE USE ONLY**

Rental License Effective from \_\_\_\_\_ To 12-31-\_\_\_\_\_ License Fee \_\_\_\_\_  
 License Amount Remitted \_\_\_\_\_ CC, Check #, Cash \_\_\_\_\_ Customer Number \_\_\_\_\_