

## **Apartment/Duplex Business License**

Please complete the following information for the property owner. This information must be completed even if the property is managed by a property manager or management company.

Duplex or Triplex - 1 to 3 units: \$20 per building

Anything over 3 units: \$5 per unit

## **Apartment** □ **Duplex** □

If an apartment complex, plea	ase provide complex name	and number of units:			
		Application Date:			
		Drivers License #/State Issued:			
		Zip Code:			
EIN:	Kansas State Sales Tax # (if applicable):				
Cell/Home #:	Billing Email:				
please complete the following	information.	or real estate company manages the propert			
		Zip Code:			
EIN:	Kansas State S	Kansas State Sales Tax # (if applicable):			
Cell/Home #:	Billing Email:				
Signature:		Date:			
Effective Date of License:					



## **Additional Property Addresses**
