EST. 1871

No.# LR-____

O. Box 207 Billings, MO

Phone 417-744-2581

APPLICATION	FOR I ANDI	ORD LICENSE	- Rental	Property

OWNER/BUSINESS NAME:	
CONTACT NAME:	
ADDRESS	CITY/ZIP
BUSINESS PHONE NO:	CELL # or OTHER
RESIDENTIAL PROPERTY ADDRESS:	
(Please list all Rental property addresses if more than one in ti	the City Limits):
NOTE:	
	(1) PLEASE ALLOW <u>THREE</u> DAYS FOR PROCESSINGYES SEND ME A CERTIFICATENO DO NOT SEND
	(2) THE LANDLORD LICENSE FEE IS \$ 25.00 for 1ST RENTAL UNIT AND 5.00 FOR EACH ADDITIONAL UNIT.
	(3) IF A LANDLORD LICENSE IS ISSUED, IT WILL BE FOR THE ABOVE RENTAL ADDRESS ONLY, ANY CHANGE IN NUMBER OF
	RENTALS WILL REQUIRE A NEW APPLICATION TO BE FILED. MULTIPLE RENTALS (if applicable) CAN BE LISTED ON ONE
	APPLICATION WITH APPROPRAITE FEES ATTACHED.
	(4) ALL LANDLORD RENTAL LICENSES THAT HAVE BEEN ISSUED WILL EXPIRE AT THE END OF EACH CALENDAR YEAR AND
	COULD BE CONSIDERED DELINQUENT IF RECORDS ARE NOT UPDATED IN JANUARY OF THE FOLLOWING YEAR.
	(5) PLEASE ADVISE US IF THERE ARE CHANGES TO YOUR PROPERTY OWNERSHIP/MANAGEMENT.
	(6) REMINDER: THAT A RENTAL INSPECTION IS REQUIRED WHEN OCCUPANTS CHANGE.
	We Thank You for your participation in this procedure as it has definitely increased the health, safety and welfare of our community.
REMARKS:	
SIGNATURE OF APPLICANT:	

FOR THE PROCESSING OF YOUR LICENSE. Thank You