

City of Belton, Missouri

520 Main Street – Belton, MO 64012 P 816.331.4331 cityclerk@belton.org

Residential Landlord Business License Application (please type or print)

Reminder – A business may **NOT** operate until a business license is approved.

Please allow 3-5 days for license processing.

Fees

License Year 2023-24

License fee \$70

Fire and building inspections are required for initial licensing of physical commercial business sites located in Belton city limits. Inspection fee \$50.

License fees are not prorated. City licenses expire June 30 of each year.



This application is intended for use by residential property landlords. Property management companies should use the General Business License Application. **Residential Property Landlord Information** Business Name DBA Name (if different) Address (No PO Boxes) Number of Employees City/St/Zip (not counting owners) Mailing Address (if different) _______City/St/Zip Phone Number _____ Description of Type of Business Residential Landlord Email Yes / No Does this business do retail sales within the city limits of Belton? If yes, attach a Certificate of No Tax Due from MoDOR dated within the past 90 days. (RSMo 144.083) Retail Sales Tax # Is this business a nonprofit? If yes, for New Applications Only, attach IRS form showing status. Nonprofits are Yes / No exempt from license fee. **Ownership Information** ☐ Sole Proprietor ☐ Partnership ☐ Corporation or LLC ☐ Other (complete section A) (complete section B) (complete section C) Section A – Sole Proprietor A single-member LLC should fill out section C Owner's Name _____ Home Address (if different than above) City/St/Zip Cell phone Email EIN# or SS# New Applications Only, attach the owner's valid driver's license or other valid government-issued ID (passport, state-issued ID card, military ID). If the owner lives inside Belton city limits, attach the previous year's personal property tax receipt OR a letter of non-assessment from Cass County. Section B – General Partnership A limited partnership (LP) should fill out section C #1 Owner's Name _____ Home Address _ City/St/Zip (if different than above) EIN# or SS#_ Email Cell phone New Applications Only, attach the owner's valid driver's license or other valid government-issued ID (passport, state-issued ID card, military ID). If owner #1 lives inside Belton city limits, attach the previous year's personal property tax receipt OR a letter of non-assessment from Cass County. #2 Owner's Name _____ Home Address _ (if different than above) _____ Email _____ EIN# or SS#____ Cell phone New Applications Only, attach the owner's valid driver's license or other valid government-issued ID (passport, state-issued ID card, military ID). If owner #2 lives inside Belton city limits, attach the previous year's personal property tax receipt OR a letter of non-assessment from Cass County. Office Use Only Approved by _____ Date ___ Business License # BL / BR _____ Fee \$ _____ / Exempt 4/2023

Section C – Corporation or LLC	For all LLC, INC, and LP		
EIN#	☐ <u>New Application</u> (RSMo Chapter 347; 4)	ns Only, attach registration with the Mis	ssouri Secretary of State
Please list principal officers/members (e. showing officers/members/positions.	•	•	of State Registration form
1. Name	Position		
2. Name			
3. Name			
4. Name			
Name of KC Metro area contact for lar	ndlords not physically located in B	elton	
Position	Home Address		
Cell Phone	Email		
Additional Information for Residen	ntial Landlords		
	I rent/lease single family house(s) I rent/lease multi-family house(s) I rent/lease apartment(s)	Dwelling Type (SF) Dwelling Type (MF) Dwelling Type (APT)	
Please list by address all residential renta	l property you own in Belton city limit	ts. Attach additional sheet, if necess	sary.
Address	/ Unit #	Dwelling Type	
Address	/ Unit #	Dwelling Type	
Address	/ Unit #	Dwelling Type Dwelling Type	
Yes / No Do you utilize a property may be on file for your property management license status. Attach additional sheet, if	company. Please provide your proper		
Name/ address/ phone number of Propert	y Management Company		
Additional Information for ALL B	HCINECCEC		
Additional Information for ALL D	USINESSES		
Yes / No Do you or your corporate bus	siness own residential rental property in	n another location? If yes, please pr	rovide location information. (city/state)
Yes / No Have you or your corporate b	business entity ever had a business lice	nse revoked, suspended, or denied?	If yes, please explain.
By signing my name below, I certify the occupation I intend to pursue under the laws of the State of Missouri or ordinance best of my knowledge. I authorize the city the application. I also acknowledge that it Missouri. Please note: this application must be full the significant of the significant	authority of the license for which I am es of the City of Belton. I certify the in y, its agents, and employees to seek inf this is only an application and is not ap	n applying does not violate or other formation contained herein is true, of formation and investigate the truth of proval for me to operate a busines	rwise conflict with existing correct, and complete to the of the statements set forth in
Signature of Owner or Agent F	Printed Name	Position	Date
Wanting to pay online? Send a co	mpleted application packet and	a payment link will be email	led to you.

Questions? Need additional assistance? Please contact the City Clerk's Office 816.331.4331 or cityclerk@belton.org