

OWNER – MANAGEMENT CO. APPLICATION

City of Blue Springs Utility Billing Department

Date \_\_\_\_\_

903 W. Main. St. Blue Springs, MO 64015

[water@bluespringsgov.com](mailto:water@bluespringsgov.com)

816-622-4444

OWNER \_\_\_\_\_

Company Name (D.B.A., if applicable) \_\_\_\_\_

Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Driver Lic. \_\_\_\_\_ State \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_

Blue Springs Bus. Lic. \_\_\_\_\_ Tax I.D. # (if applicable) \_\_\_\_\_

MANAGEMENT CO. (if applicable) \_\_\_\_\_

**\*\*If a Mgmt. Co. is acting on behalf of the owner, a Management Contract and appropriate Business Licenses are required.**

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_

Blue Springs Bus. Lic. \_\_\_\_\_ Tax I.D. # (if applicable) \_\_\_\_\_

**\*PLEASE indicate who is to receive the monthly invoice, choose 1 only:**  Owners Address  Mgmt. Co. Address

**Additional Contact Persons Authorized to Establish Utility Service for this Applicant:**

Name \_\_\_\_\_ Driver License # \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_ Driver License # \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_ Driver License # \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_ Driver License # \_\_\_\_\_ State \_\_\_\_\_

***Owners will be held to the following City code SECTION 605.200 and must hold a City of Blue Springs Business License, if four or more living units or commercial units are owned. Management Companies will also need appropriate licensing.***

**Please list addresses owned within the City of Blue Springs (attach a separate sheet if needed)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please contact our office if an address is SOLD or new locations purchased.**

- I fully understand that this application will be held on file with the City of Blue Springs Utility Department.
- Services will NOT be established unless the caller is the applicant or listed as an authorized party on this application.
- This application **DOES NOT** enroll the applicant in any form of "REVERT TO OWNER"
- Additional information regarding ownership or management may be required upon review of this application.