

CITY OF BLUE SPRINGS – LANDLORD APPLICATION



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

water@bluespringsgov.com

816-622-4444

816-220-4513 (fax)

Date _____

Applicant's Name _____

D.B.A./Property Mgmt Co. _____

Driver's License # _____ State _____ Business Phone # _____

Email Address _____

Cell # _____ Fax # _____

Business Mailing Address _____

Blue Springs Business License # _____ Missouri Tax I.D. # _____

****Important Information – Please Read****

*Landlords will be held to the following City code **SECTION 605.200** and must hold a City of Blue Springs Business License if 4 or more living units or commercial units are owned.*

List all addresses owned by applicant below: *(attach a separate sheet if needed)*

Additional Office Personnel Authorized to Establish Utility Service:

Name _____ Driver License # _____ State _____

Name _____ Driver License # _____ State _____

Name _____ Driver License # _____ State _____

Name _____ Driver License # _____ State _____

COMPLETED APPLICATION MUST BE RETURNED TO THE:

City of Blue Springs
Utility Billing Department
903 W. Main St.
Blue Springs, MO 64015
water@bluespringsgov.com

- 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.