



**RESIDENTIAL LANDLORD LICENSING**  
 CITY OF MERRIAM - COMMUNITY DEVELOPMENT DEPARTMENT  
 9001 W. 62<sup>nd</sup> St., Merriam, Kansas 66202-2815  
 Phone: (913)322-5520 Fax: (913)322-5505

**RLL NUMBER** \_\_\_\_\_

<b>RENTAL ADDRESS:</b>			
Owner's Name:		Owner's Phone Number:	
Owner's Address:			
City/State/Zip:			
Date of Birth:			
Driver's License:			

This form and licensing fee must be returned prior to January 15<sup>th</sup>. A monthly penalty will be added after January 15<sup>th</sup> of the licensing year. Please complete this form with payment to:

**City of Merriam c/o City Clerk's Office**  
**9001 W. 62<sup>nd</sup> St.**  
**Merriam, KS 66202-2815**

To update our landlord license files and provide our Police & Fire Departments with current contact information for emergency matters, please review the information below and update if there are any changes. Please list name and telephone number of other persons who may be contacted in case of an emergency.

Will this property be leased as a short-term rental (Airbnb, VRBO, etc.)? \_\_\_\_Yes \_\_\_\_No

<b>CONTACT</b>		Phone Number:	
Relationship		Email	
<b>CONTACT</b>		Phone Number:	
Relationship		Email	
<b>CONTACT</b>		Phone Number:	
Relationship		Email	
<b>CONTACT</b>		Phone Number:	
Relationship		Email	
<b>CONTACT</b>		Phone Number:	
Relationship		Email	

<b>Tenant's Name</b> (not required)		Phone Number (not required)	
<b>Tenant's Name</b> (not required)		Phone Number (not required)	

*By obtaining a Landlord Occupational License, I agree to abide by the ordinances contained in the Merriam City Code and any conditions placed upon the issuance of said License. I also hereby grant the City of Merriam, upon notice, the right to inspect the licensed property for compliance with said regulations.*

X

X

*SIGNATURE*

*PRINT NAME & DATE*