

Please provide a general description or scope of work for your business:

Residential Property Management

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) -

N/A

\*For businesses physically located in Lee's Summit this section **MUST** be completed\*

Has your Physical Address changed over the last year? **Y or N** (If yes complete Zoning Approval Form)

Is business located in a Lee's Summit **Commercial area or Residential?** (circle)

Do you have an intrusion alarm? **Y or N** (circle)

Total Building Square Footage - 980 in our Suite

Employee Headcount for this location:

Full Time: 2

Part Time:

Temporary:

IF DOING ANY RETAIL SALES (provide copy of current no sales tax due letter) - N/A

IF PHYSICAL ADDRESS HAS CHANGED WITHIN LEE'S SUMMIT, PLEASE SUBMIT A NEW ZONING FORM. Zoning forms located on website at [www.cityofls.net](http://www.cityofls.net).

FEE CALCULATION (please check those that apply):

☒ X \$50 Business License Fee (base fee)

☐ Penalty for delinquent license is 5% per month not to exceed 25% (is delinquent 60 days after expiration)

☐ Total fee

I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are true and correct.

X Rodney C Bownds  
Signature of Owner(s) or Corporation Agent/Owner

X Owner and General Manager 9/14/2020  
Title Date

The filing of this application or the granting of a business license neither confirms nor approves the use of land as regulated under the provisions of the zoning code, and is further subject to all applicable federal, state and local laws and regulations which apply to specific occupations and businesses. Payment by Check – make check payable to City of Lee's Summit.

FOR OFFICE USE ONLY

License Effective from     /    /     to     /    /     Fee Remitted \$      License #

### Business License Renewal

220 SE Green Street  
 Lee's Summit, MO 64063  
 Phone 816.969.1220 / Fax 816.969.1221 / [www.cityofls.net](http://www.cityofls.net)

#### REAL PROPERTY MANAGEMENT CONSULTANTS

Licensing  
 684 SE BAYBERRY LN, Unit 104  
 LEES SUMMIT, MO 64063

#### PLEASE NOTIFY US IF YOU DISCONTINUE YOUR BUSINESS.

Please Update your Information. If there are changes to the information provided, please draw a line through and correct.

Physical Business Address: 684 SE BAYBERRY LN 104 LEES SUMMIT, MO 64063

Business E-Mail Address:: ROD@REALPMCONSULTANTS.COM

Legal Name of Business: (if different than DBA):

Type of Organization: Rentals/Leasing

Business Classification: 400 Apartments/Duplexes/Rental Houses/Shopping Center

**Renew on-line communications email address:** Rod@RealPMConsultants.com

(If you would like to renew on-line, you must provide an email above. This email address could be different than the Business Email Address. This email address is the person that is responsible for Business Licenses/Renewals at your place of business- Further Instructions included)

#### Business Phone Numbers :

Primary	Cell	Fax
8162070750	8165063926	8162070950

#### Contact Information :

Primary	Secondary	Emergency
ROD BOWNDS, Address:4316 SE CANTER DR, Phone:(816) 506-3926		

(Continued on back page)