

Do Not Write Above this line

**APPLICATION FOR OCCUPATION LICENSE
 CITY OF ROELAND PARK, KANSAS**

Please change any information which is not correct and fill in any blank fields.

Company Name _____ Mailing Address: (if different from Billing) _____
 Billing Address _____ Address _____
 City, State, Zip _____ City, State, Zip _____
 Email _____ Phone _____
 Services Provided: _____ Contact Name _____

Type of License _____ (See List below)

Sq Footage _____

- _____ Home Occupation §5-104(c)* ----- \$40.00
- _____ Massage Establishment --§5-303 - - \$150.00
- _____ Non-Domicile Business --§5-104(d) --- \$80.00
- _____ Retail and Administrative Offices (see table)

_____ Solid Waste Disposal --§5-104(e)
 _____ No. of Vehicles (\$50.00 per vehicle)

_____ Service Station §5-104(a) ----- (See Table for Retail Establishments) + Per Pump Fee

5-104 (a) Retail Establishments & Admin Offices: (Occupation Fee Levied)

0 - 499 sq. ft	\$50	8,000 - 8,999 sq. ft	\$360
500 - 999 sq. ft	\$65	9,000 - 9,999 sq. ft	\$430
1,000 - 1,999 sq. ft	\$100	10,000 - 10,999 sq. ft	\$500
2,000 - 2,999 sq. ft	\$125	11,000 - 12,999 sq. ft	\$560
3,000 - 3,999 sq. ft	\$150	13,000 - 14,999 sq. ft	\$620
4,000 - 4,999 sq. ft	\$180	15,000 - 17,999 sq. ft	\$710
5,000 - 5,999 sq. ft	\$210	18,000 - 20,999 sq. ft	\$785
6,000 - 6,999 sq. ft	\$230	21,000 - 24,999 sq. ft	\$950
7,000 - 7,999 sq. ft	\$290	25,000 and over sq. ft	\$950 +\$30 per 1,000 sq. ft.

In addition to the square foot charge set forth above, businesses engaged in the sale of gasoline shall pay a supplemental annual occupation fee of \$10 per pump handle.

Number of Pump Handles _____ Per Pump Fee _____

*Those seeking to license an in-home daycare with more than three children, must complete a [Special Use Permit Application](#) and pay the associated fees and obtain approval from the City Planning Commission (Ord. 961, adopted 11/20/2017). Approval expires after five years. Annual renewals require a copy of the state licensure.

Total Amount Due _____

Compute your annual license fee and file your application with remittance before December 1st. Make Check or Money Order payable for amount of annual fee due to the "City of Roeland Park" and mail to the City Clerk, "OCCUPATIONAL LICENSE", 4600 W. 51st Street, Roeland Park, Kansas 66205.

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

 Name of Owner(s) or Corporation

By: _____
 Signature

KS State Tax ID# _____ (Required)

 Title: Owner, Partner or Corporate Officer