

BUSINESS LICENSE DIVISION

Neighborhood Resource Center
Unified Government of Wyandotte County/ Kansas City, Kansas
4953 State Avenue, Kansas City, Kansas 66102
p. (913) 573-8780 | f. (913) 573-8622 | www.wycokck.org/businesslicense

FLEA MARKET LICENSE APPLICATION (\$100 Annual Fee) January 1-December 31 _____ Business License Number____ Business Name _____ Business Address Business Owner Name Business Owner Address Mailing Address _____ Telephone Number SS# or FEIN# Ownership Type [] Individual [] Partnership [] Corporation [] LLC (If applicant is a partnership, corporation, or LLC list the name and home address of each partner, officer, or principal on a separate sheet.) Name of Property Owner Address of Property Owner (Written consent of property owner must be submitted with this application if business owner does not own property.) Resident Agent Name Resident Agent Address ______ Telephone _____ Description of merchandise offered for sale (attach separate sheet if necessary). By my signature I certify that I have received, read, and understand the ordinance pertaining to flea market sales, and agree to adhere to the contents thereof: Signature Date Sworn and subscribed before me this day of 20

Signature of Notary Public _____