Proof of Residency – Examples

Property Tax

PLATTE COUNTY TAX RECEIPT

YYYY REAL ESTATE

Sheila L. Palmer, Collector

Online @www.plattecountycollector.com
Live Chat M-F 8:30 a.m to 4:30 p.m.
Administrative Building
415 Third St. Room 212
Platte City, MO 64079
Phone: 816-858-3356

SMITH, JOHN
123 N REAL ST
PARKVILLE MO 64152

PARCEL ID#:
SEC, TWN, RNG:
ACRES:
TAX DISTRICT#:
GROUP CD:
DELINQ YEARS:
M-CODE:
PHYSICAL ADDRESS: 123 N REAL ST
TOTAL APPRAISED:

Property Description

	Assessed Land	Assessed Structure	SUBTOTALS
Residential			
Agricultural	0	0	0
Commercial	0	0	0
SUBTOTALS			

TOTAL ASSESSED VALUATION

Tax District	Levy per $100	Total Tax
State Blind Pension Fund	0.0300	
County	0.0600	
Health Department	0.0729	
PC Board of Svcs for Dev Disabled	0.1186	
Mental Health	0.0911	
Mid-Continent Public Library	0.3468	
Senior Citizen Levy	0.0457	
Park Hill School	5.3955	
Platte City Special Road	0.2696	
Kansas City	1.6981	
Metropolitan Community Colleges	0.2028	
Total Tax Rate	8.3311	

Date Printed: MM/DD/YYYY

PAID

VALIDATED BY
PLATTE COUNTY COLLECTOR
PLATTE COUNTY AUDITOR

DATE: MM/DD/YYYY AMOUNT PAID: TRANSACTION #:

REAL ESTATE TAX RECEIPTS CANNOT BE USED TO LICENSE VEHICLES

Mortgage Statement

WELLS FARGO Home Mortgage

Return Mail Operations
PO Box 14411
Des Moines IA 50306-3411

Statement date	MM/DD/YYYY
Loan number	
Payment due date	**MM/DD/YY**
Total amount due	

On or after MM/DD/YYYY, a late charge of $ may apply.

Property address: 123 N REAL ST, PARKVILLE, MO 64152

Customer Service

Correspondence
PO Box 10335
Des Moines IA 50306

Payments
wellsfargo.com
PO Box 77036
Minneapolis MN 55480

Telephone*
1-800-222-0238

Fax
1-866-278-1179

Hours of operation
Mon - Fri 6 a.m. - 10 p.m.
Sat 8 a.m. - 2 p.m. CT

Purchase or refinance
1-800-554-2880

*We accept telecommunications relay service calls.

JOHN SMITH
123 N REAL ST
PARKVILLE, MO 64152

NNNNNNNNN

Explanation of amount due

Principal	
Interest	
Escrow	
Current payment	
Total amount due	

Account summary

Unpaid principal balance	
(This is not a payoff amount.)	
Escrow balance	
Interest rate	
Maturity date (month/year)	

Past payments breakdown

	Since last statement	Year-to-date
Total received*		
Principal		
Interest**		
Escrow		

*This total may include the Unapplied funds balance from the Account summary section.
**This information should not be used for tax purposes. If you have tax related questions, please consult your tax advisor.

Activity since your last statement

Date	Description	Total	Principal	Interest	Escrow	Other
	Principal payment					
	Payment					
	Funds Received					
	Funds Received					
	Mtg ins payment					
	Funds Received					

Important messages

This is not a bill, our records indicate your payments are scheduled to withdraw automatically. All funds are applied when sufficient funds have accumulated to make a full monthly payment as outlined in your mortgage note. A payment remitted via another source will not stop the drafting process. If you are paying off your loan, please contact us at least five (5) days prior to your next withdrawal date.

Gas Bill

spire

Customer service or gas emergencies: 800-582-1234

Statement Date: MM/DD/YYYY
Account Number:
Service Address: 123 N Real St

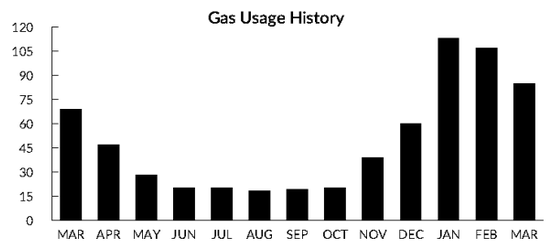
Bill at a Glance	Amount
Previous Balance	
Payment - Thank you	
Total Current Charges	
Total Balance	
Amount Due	
Due By	MM/DD/YYYY
Late Fee Assessed After	MM/DD/YYYY

John Smith
123 N Real St
Parkville, MO 64152

Present Reading	Previous Reading	Usage (CCF) X	Pressure Factor	= Billable CCFs
1056	971	85	1.0000	85.00
Actual		Residential		

Delivery Charges 02-17-2022 to 03-17-2022	
Customer Charge (1 Meter(s) at $20.00 per Meter)	
Winter Usage: 85 CCF @ $0.27073	
WNAR	
Natural Gas Cost	
Usage: 85 CCF	
Taxes	
Franchise Tax	
Other Charges	
Utility Late Charge	
Total Current Charges	

Gas Usage History



Total Billable CCFs Used	
Daily Average Billable CCFs	
Days in Billing Cycle	

Important Message

Energy assistance made easier. If you're struggling to pay your

Electricity Bill

evergy

For billing and service information : **816-471-5275**
or toll-free : **1-888-471-5275**
For emergencies or lights out : **1-888-544-4852**
(1-888-LIGHT-KC)

Customer Name : **JOHN SMITH**
Account Number : [redacted]

Page 1 of 2
Billing Date: MM/DD/YYYY

MESSAGE BOARD

You live in our **Missouri Metro** service area. Rates and available programs can vary based on your service area. For more info, visit **evergy.com/ServiceArea.**

Summer rates begin May [redacted]. The price for electricity is slightly higher during the four months ahead, when it's more expensive to produce energy because demand is at its highest.

Effective April 1, the factor for the Fuel Adjustment Clause (FAC) charge on your bill will change. For more info, visit **evergy.com/BillDefinitions**.

Account Summary

For service for MM/DD/YYYY to MM/DD/YYYY

Previously Billed.....
Utility.....

Payment Received MM/DD/YYYY - Thank you.....

Current Charges (details on back) .....
Utility .....

Due Upon Receipt.....

DO NOT PAY
[redacted] will be charged to your card on **MM/DD/YYYY**

Other Responsible Customers
[redacted]

Customer Name : **JOHN SMITH**
Account Number : [redacted]
Billing Date : **MM/DD/YYYY**

☐ *CHECK HERE*
to indicate address or phone changes on back of stub

JOHN SMITH
123 N REAL ST
PARKVILLE, MO 64152

DO NOT PAY
[redacted] will be charged to your card on **MM/DD/YYYY**

EVERGY
PO BOX 219330
KANSAS CITY MO 64121-9330

Water Bill

MISSOURI AMERICAN WATER
WE KEEP LIFE FLOWING™

Page 1 of 5

Service Address:
JOHN SMITH
123 N REAL ST
PARKVILLE, MO 65142

THANK YOU FOR BEING OUR CUSTOMER.

Important Account Messages

- Want to get to know us better? Visit www.missouriamwater.com to learn more about the services we provide.
- Thank you for being a long time customer! We work hard every day to deliver water service that is safe, reliable, and affordable -- our customers deserve nothing less.

For more information, visit www.missouriamwater.com

Statement

Account No. [redacted]

Total Amount Due:	[redacted]
Payment Due By:	**MM/DD/YYYY**

Billing Date:	Month DD, YYYY
Service Period:	Mon DD to Mon DD (29 Days)
Total Gallons:	6,400

Account Summary – *See page 3 for Account Detail*

Prior Billing:		[redacted]
Payments - Thank You!	-	[redacted]
Balance Forward:	=	[redacted]
Service Related Charges:	+	[redacted]
Pass Through Charges:	+	[redacted]
Total Amount Due:	=	[redacted]

Lease Page 1 (shows address/guardian name)

BluSky PM, LLC

P.O. Box 1521 Platte City, MO 64079

This is a legally binding contract. If not understood, seek competent legal advice. BluSky PM, LLC, the authorized agent for the below described premises acting upon the OWNER'S behalf. The tenant is not represented by the Agent.

1. PARTIES. This Agreement, made on this date MM/DD/YYYY

Between BluSky PM, LLC hereinafter **the "**OWNER and/or AGENT **", and**

John Smith

hereinafter **the "TENANT**(S)**", and jointly called the "Parties".**

Premises described as: 123 N REAL ST PARKVILLE, MO 64152

ONLY CHECKS, MONEY ORDERS, CASHIERS CHECKS are ACCEPTED. NO CASH will be accepted.

It is agreed that the OWNER may designate another agent from time-to-time by delivering notice of such change to TENANT or by mailing notice to TENANT at the leased premises via U.S. first class mail, postage prepaid.

2. OCCUPANTS. Only the designated TENANT(S), MINOR CHILDREN and the following persons shall occupy the premises:

None

Anyone who is NOT named in the above paragraph labeled as OCCUPANTS, or who does not sign this lease, may NOT reside on the premises. Anyone not listed above must not stay on the premises for more than 5 consecutive days without the **OWNER'S/AGENT'S** prior written consent and not more than twice that many days in any one month. All persons who wish to reside on the premises must be named in this paragraph, be submitted to our screening and application process and, if over age 18, sign this lease. If any adults occupy the premises other than those listed herein, the OWNER/AGENT shall have the option of pursuing any remedies allowed by law, including terminating the lease, or increasing the rent in the amount of $100 per month per additional adult.

The provisions of this paragraph do not apply to the TENANT'S minor children except that the total number of persons occupying the premises shall not exceed two per bedroom. (Sec. 441.060, R.S. Mo.) Upon request by the OWNER/AGENT, the TENANT shall provide satisfactory proof of his/her familial relationship to other occupants of the premises or the address of any person visiting or temporarily residing on the premises. The OWNER/AGENT is not obliged to allow any other person access to the premises without **the TENANT'S written instructions.**

3. PREMISES, INITIAL TERM, AND RENEWAL. OWNER/AGENT does hereby lease to the TENANT in the present condition thereof the previously described premises for the initial term beginning MM/DD/YYYY and ending at midnight MM/DD/YYYY . If the tenant remains on the premises after the term of the lease and the OWNER/Agent accepts rent, the tenant shall be a month-to-month tenant and all other terms of this lease shall remain in effect.

4. RENT, LATE CHARGES AND OTHER CHARGES. The TENANT agrees to pay rent in the amount of $ per month, payable on the first day of each month, in advance, during the entire term, starting on .

The amount of $ shall be paid as pro-rated rent for the period from MM/DD/YYYY to MM/DD/YYYY .

Additionally, TENANT agrees to pay a late charge of $50.00 if TENANT fails to fully pay rent by the 5th day of each month or $100 if rent is more than 31 days past due. A check, which is returned for any reason, is deemed non-payment of rent, and is subject to late charges and an additional administrative charge of $25.00. **OWNER/AGENT may, at OWNER's/AGENT'S option, demand that all** sums payable under this lease be paid by cashier's check, bank check, or money order in lieu of personal checks or cash. Once one dishonored check has been received, OWNER/AGENT will automatically exercise above option, without notification to TENANT.

All **payments by the TENANT shall first be credited to the TENANT'S outstanding balances, if any, for repairs or for delinquent re**nt, then to late fees, and lastly to the current month's rent regardless of any notations made on the check by the tenant.
The TENANT shall not withhold or offset rent unless authorized by statute. Any rent lost in the mail will be treated as if unpaid until received by AGENT.

Lease Page 2 (signature page)

You are legally bound by this document. Please read it carefully.
Before submitting a rental application or signing a Lease, you may take a copy of these documents to review and/or consult an attorney.

You are entitled to a copy of this lease after it is fully signed.
This form has been approved by legal counsel.

IN WITNESS WHEREOF, The said parties have hereunto set their hands the day and year first above written.

TENANT(s) (all sign below)

Tenant Signature Date: MM/DD/YYYY

Tenant Signature Date: MM/DD/YYYY

_____ Date:_____

OWNER (or Agent signing on behalf of OWNER)

BY: *Owner Signature* Date: MM/DD/YYYY

BluSky PM, LLC

Please hand deliver, pay online or mail payments to:

BluSky PM, LLC
PO Box 1521
Platte City, MO 64079

Payment Portal:
Visit Bluskypm.com and click resident sign in.