



# Residential Rental License Application

OFFICE USE ONLY

DATE RECEIVED: \_\_\_\_\_  
NUMBER OF UNITS: \_\_\_\_\_  
INSPECTION DATE: \_\_\_\_\_

NEW LICENSE \_\_\_\_\_ LICENSE RENEWAL \_\_\_\_\_ CHANGE IN LICENSE \_\_\_\_\_

## RENTAL PROPERTY INFORMATION

RENTAL PROPERTY ADDRESS:

NAME OF COMPLEX (if applicable):

TYPE OF RENTAL PROPERTY:     SINGLE FAMILY     DUPLEX     3 or MORE UNITS (# of UNITS \_\_\_\_\_)

## PROPERTY OWNER INFORMATION

INDIVIDUAL     CORPORATION     PARTNERSHIP     COMPANY     OTHER \_\_\_\_\_ DESCRIBE \_\_\_\_\_

(If multiple owners, attach list)

NAME(S):

MAILING ADDRESS:

PHONE/CELL:

E-MAIL:

## PROPERTY MANAGER/CARETAKER INFORMATION

IS THERE A PROPERTY MANAGER/CARETAKER FOR THIS PROPERTY:     YES     NO    If yes, please provide the following:  
The Property Manager/Caretaker listed below is authorized to make or order repairs and/or service to the building, to provide required services necessary to protect the health, safety and welfare of the occupants or is able to contact the person so authorized.

NAME:

MAILING ADDRESS:

PHONE/CELL:

E-MAIL:

EMERGENCY (24-HOUR) PHONE NUMBER:

PRIMARY CONTACT PERSON IS:     OWNER     PROPERTY MANAGER/CARETAKER

RENTAL LICENSE RENEWAL INFORMATION SHOULD BE SENT TO:     OWNER     MANAGER/CARETAKER

## LICENSING PROCESS

- Fill out this application completely.
- Enclose the appropriate license fee (see the fee schedule on the back of this application).
- Sign, date and return the completed application to City Hall.
- Following receipt of the application, the Rental Inspector will be contacted and an inspection of the rental property will be scheduled.
- Refer to the enclosed brochure for a checklist of items covered during the rental inspection.

I understand that it is my responsibility to submit all required information and fees and to obtain all necessary approvals prior to licensing. I further understand that, prior to licensing, an inspection of the property must be completed by the City of St. Clair Rental Housing Inspector. I acknowledge that it is my responsibility to operate and maintain the property in accordance with the requirements and standards described in the City of St. Clair Ordinance Code Chapter 13 Residential Rental Ordinance. I further acknowledge that if such requirements and standards are not maintained that I am subject to applicable sanctions and penalties.

APPLICANT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**RENTAL LICENSE and INSPECTION FEE SCHEDULE**

LICENSE FEE:		\$ 25.00 per Building	\$
INSPECTION FEE:	SINGLE FAMILY	\$ 60.00	\$
	DUPLEX	\$ 60.00	\$
	MULTI-FAMILY		
	first 3 Units	\$ 60.00	
	4 <sup>th</sup> Unit and each Unit thereafter	\$ 30.00 per Unit	\$
RE-INSPECTION FEE:		\$ 30.00	\$
		<b>TOTAL DUE</b>	\$

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INSPECTION DATE/TIME			
INSPECTION DATE:	INSPECTION TIME:		
FEES			
LICENSE FEE:	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK #	DATE:
INSPECTION FEE:	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK #	DATE:
RE-INSPECTION FEE:	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK #	DATE:
INSPECTION			
INSPECTION:	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL	DATE:
RE-INSPECTION:	<input type="checkbox"/> PASS	<input type="checkbox"/> FAIL	DATE:
COMMENTS:			
LICENSE			
LICENSE NUMBER:			
DATE ISSUED:			
EXPIRATION DATE:			