



# RENTAL HOUSING LICENSE APPLICATION

New License \_\_\_\_\_

License Renewal \_\_\_\_\_

Change in License \_\_\_\_\_

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## OWNER INFORMATION

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

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## PROPERTY MANAGEMENT INFORMATION (Vendee information if sold through CD)

Contract for Deed: YES \_\_\_\_\_ NO \_\_\_\_\_

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

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## AGENT (if different than property owner)

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

**RENTAL PROPERTY INFORMATION**

Property address \_\_\_\_\_

Type (circle one)      SINGLE FAMILY      DUPLEX      3 OR MORE UNITS (multi-family)

# of Occupants \_\_\_\_\_

**IF MULTI-FAMILY BUILDING – COMPLETE THE FOLLOWING:**

a) How many buildings in complex? \_\_\_\_\_      b) How many units in each building? \_\_\_\_\_

Description of procedure through which tenant inquiries and complaints are to be processed:  
(attach separate sheet if necessary) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Applicant’s Affidavit**

- I certify that there are no delinquent property taxes for this dwelling unit.
- I certify that there are no delinquent utility bills for this dwelling unit.
- I acknowledge I have received a copy of Chapter 7, Section 11 of the Otsego City Code.

\_\_\_\_\_  
**Signature of Owner/ Agent**

\_\_\_\_\_  
**Date**

**For City Use only:**

Total number units: \_\_\_\_\_

Date Received: \_\_\_\_\_

Application checked and approved by: \_\_\_\_\_

Date Approved: \_\_\_\_\_