

APPLICATION FOR RENTAL CERTIFICATE

City of Lincoln Park · 1355 Southfield Rd · Lincoln Park · Michigan · 48146 · (313)386-1800

RENTAL PROPERTY ADDRESS:

TENANT: _____

PHONE NUMBER: (____) _____

OWNER(S) OF PROPERTY:*

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

Work Phone: _____

Driver's Lic. #: _____

Date of Birth: _____

RESPONSIBLE PARTY:** Same as owner

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

Work Phone: _____

Driver's Lic. #: _____

Date of Birth: _____

* List additional owner's or officer's information on separate sheet and attach.

** Responsible party must be a Michigan resident and live within one hundred (100) miles of Lincoln Park. All correspondence is sent to the responsible party. **A COPY OF THE MANAGEMENT AGREEMENT BETWEEN THE OWNER AND RESPONSIBLE PARTY MUST BE INCLUDED WITH THIS APPLICATION.**

HOUSES ONLY:

One Family - \$300.00

Two Family - \$375.00

License Fee: \$ _____

APARTMENTS ONLY:

No. of Buildings: _____

No. of Apartments per Building: _____

Total number of Apartments: _____

License Fee: \$300.00 Each Building, \$75.00 Each additional unit \$ _____

The correct registration fee must accompany this application. Upon inspection and approval by the Building Department, a license will be issued. It is a violation of the Ordinance not to notify this Department of a change in ownership or contact information. The Owner(s) and Responsible Party remain liable under this agreement until such change in ownership is notified. Change in ownership does not negate liability for violations that occurred during ownership of this property.

E-mail address _____

By signing this application I certify that I have read and understand the above and below conditions and state that all information is true to the best of my knowledge. I PERSONALLY GUARANTEE TO PAY ALL FEES OR FINES THAT MAY ACCRUE TO THIS PROPERTY AS WELL AS GUARANTEE TO PAY THE COST OF DEMOLITION IN CASE OF CONDEMNATION OR PURSUANT TO ANY ORDER FROM THE CITY TO DEMOLISH OR MAKE SAFE. I AGREE THAT ALL DISPUTES ARISING OUT OF THIS AGREEMENT ARE IN THE EXCLUSIVE JURISDICTION OF THE COURTS OF MICHIGAN. THIS AGREEMENT IS GOVERNED BY MICHIGAN LAW.

Must be signed by Legal Owner or Responsible Party:

(Print Personal Name: no LLC, Corporation, or Other Legal Entity)

(Signature) DATE: _____

DRIVER'S LICENSE: STATE _____ NUMBER _____

FOR OFFICE USE ONLY

Expiration Date: _____ Amount Paid: _____ Date Paid: _____ Clerk: _____ License _____