

# RENTAL PERMIT APPLICATION

**RENTAL PROPERTY ADDRESS:** \_\_\_\_\_

*(One Form per Rental Building)*

Pursuant to Municipal Code, ARTICLE IX this Application shall be completed and signed by the Owner. Following receipt and satisfactory review of this Rental Permit Application, the Town shall issue the Owner a Rental Permit. The Rental Permit shall not expire, unless revoked or the dwelling or dwelling unit changes ownership. The Rental Permit is nontransferable.

**OWNER:**

Name of Owner: \_\_\_\_\_ Name of Contact: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

**REPRESENTATIVE:**

Name of Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Address of Representative: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

Notification to the Representative at the above address constitutes sufficient notice pursuant to any provisions of the Article.

**PROPERTY DESCRIPTION:**

\_\_\_ Apartment Building    \_\_\_ Condominium    \_\_\_ Two-Family Dwelling    \_\_\_ Single Family Residence

\_\_\_ Exempt    \_\_\_ Other; please describe: \_\_\_\_\_ Number of Rental Units: \_\_\_\_\_

Name of Tenant: \_\_\_\_\_ Cell #: \_\_\_\_\_ Unit #: \_\_\_\_\_

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Rental Unit Inspection Fee \$200.00    Re-Inspection Fee \$60.00    Non-Compliance Fee \$250.00/unit per occurrence

*In the event an owner provides the Town with an inspection report which complies with the requirements of Indiana State Statute HEA 1403 prior to the date inspection is due under this Article, the owner shall be exempt from the inspection requirements of this code. The inspection report provided must be certified by a party whose qualifications meet the requirements of HEA 1403 or the report must be certified by a home inspector licensed by the State of Indiana Home Inspectors Licensing Board.*

I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I UNDERSTAND THAT THE ISSUANCE OF A RENTAL PERMIT IS NOT EVIDENCE THAT MY PROPERTY MEETS THE REQUIREMENTS OF THIS ARTICLE, OR IS OTHERWISE FIT FOR HUMAN HABITATION.

Applicant's Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Permit # \_\_\_\_\_ Date Issued: \_\_\_\_\_ Receipt # \_\_\_\_\_ Date Paid: \_\_\_\_\_