



Rental Housing License Application

(ONE APPLICATION PER RENTAL PROPERTY)



Rental Property Information		
Site Address:		
Complex Name (if multi-family):		
<input type="checkbox"/> Townhome <input type="checkbox"/> Duplex <input type="checkbox"/> Tri-plex <input type="checkbox"/> Four-plex <input type="checkbox"/> Six-plex <input type="checkbox"/> 18 Unit		
Total Number of Units:		
Property Owner Information		
Owner:		
<input type="checkbox"/> Sole Proprietor/LLC <input type="checkbox"/> Corporation		
Name(s) of Partners/Corporate Officers:		
Mailing Address:		
Phone:	Cell Phone:	E-mail:
Resident agent, caretaker, or manager on the premises		
Name:		
Name of Company:		
Mailing Address:		
Phone:	Cell:	E-mail:
Primary Contact		
<input type="checkbox"/> Owner <input type="checkbox"/> Property Manager		
Preferred Method of Contact: <input type="checkbox"/> Email <input type="checkbox"/> US Postal Mail		
Rental Status		
<input type="checkbox"/> New License <input type="checkbox"/> Transfer <input type="checkbox"/> Renewal <input type="checkbox"/> Licensed Facility (include license) <input type="checkbox"/> Sold – Owner/Occupied		
Fees		
Calculations (see notes below) - \$72.00 per unit Reinspection fee - \$105.00 per unit Point of Conversion Fee - \$750.00 <i>Late fees for all licenses</i> 1 – 15 days late – 50% of license fee 16+ days late – 100% of license fee		

DATA PRIVACY NOTICE

The data you have supplied on this form will be used to assess your qualifications for a rental license. You are not legally required to provide this data, but we will not be able to grant the license without it. If a license is granted, the data you have supplied will constitute a public record and copies may be issued to anyone requesting them. The required data allows us to distinguish you from other applicants; to identify you in our license files; to verify that you are the person who applied for the license; and to contact you if additional information is required.

CERTIFICATION

The undersigned hereby applies for a certificate of occupancy as required by Sec. 18-57 (3) of the City Code of the City of St. Paul Park; and attests that the subject premises will be operated and maintained according to the requirements contained in the Uniform Housing Code 1994, subject to applicable sanctions and penalties. The undersigned further agrees that the subject premises may be inspected by the housing official as provided in Sec. 18-57 (3) of the City Code. The applicant further certifies that all statements and facts in this application are true and authorizes the St. Paul Park and/or Rum River CC to investigate any or all statements or facts contained herein acknowledging that the misrepresentation or the omission of facts called for will be just cause for the suspension or revocation of the license. I hereby agree to notify the City of St. Paul Park within 30 days of any changes in ownership or type of occupancy.

I have received and understand the Rental Licensing Pre-Inspection Checklist.

Printed Name

Signature

Date

Payment for your license is due upon receipt of the application. Checks are the preferred method of payment. Please make all checks payable to the *City of St. Paul Park* and return the payment and application to:
City of St. Paul Park 600 Portland Avenue, St. Paul Park, MN 55071.