



NEW OWNER RENTAL UNIT LICENSE APPLICATION

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Address of rental			
Number of sleeping rooms per dwelling unit		Occupancy per unit	Total Occupancy
Class of license sought (circle one)	I II III IV V VI	Is subletting allowed? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this in the historical district? <input type="checkbox"/> Yes <input type="checkbox"/> No Has this property been subject to Terms and conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No	I have attached a: <input type="checkbox"/> Site plan <input type="checkbox"/> Floor plan <input type="checkbox"/> Photos of the front, back, sides and dive approach

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Name	Drivers license number/corporate ID number	
Permanent address	Home phone	Business Phone
City	Fax Number	
E-mail address	Real Estate License Number	

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Name	Drivers license number/corporate ID number	
Permanent address	Home phone	Business Phone
City	Fax Number	
E-mail address	Real Estate License Number	
Signature of legal agent accepting responsibility		Date

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Previous owner's name	Anniversary date if current license
Date of last annual inspection ___/___/___ Compliance	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any terms and conditions or sanctions in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any city fees delinquent? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of transfer

Name of every resident agent, individual partner or managing member	
_____	_____
_____	_____
_____	_____

Note: ** Corporate owners must attach a copy of the most recent Annual Report filed with the State of Michigan.
** If this property is in a Historical District, any exterior change requires Certificate of Appropriateness to be issued by the Historic District Commission or an acknowledgment that one is not necessary.

OWNER CERTIFICATION

I, by my signature, hereby make application for a housing license for the above premises and agree to permit the Chief Code Official and/or appointees to enter and perform inspections as required by Article 10 of Chapter 101 of the Code of the City of East Lansing in the manner permitted by said article. I certify that insurance coverage for the structural loss or damage and premises liability for personal injury exists and shall be maintained on the licensed property. I authorize the person I have designated in this application (if any) as my legal agent.

Signature _____ Date _____

CLEARLY PRINT NAME (FIRST AND LAST) _____

NOTARY

Subscribed and sworn to before me this
_____ day of _____ 20_____

_____ County, Michigan

My commission expires _____

NOTICE: A hearing before the Housing Commission may be required.

For office use only:

Received by _____

Date _____

Approved by _____

Cash Credit card

Check # _____

Amount \$ _____

Actions required:

Notes:

