



<b>New License</b> _____ \$165 (includes inspection)
<b>License Renewal</b> _____ \$100
<b>License Renewal with Inspection</b> _____ \$165 (every 3 years)

# Rental Housing License Application

## Rental Property Information

Property Address: \_\_\_\_\_

Type (**circle one**):    SINGLE FAMILY    DUPLEX    3 OR MORE UNITS (MULTI-FAMILY)

NUMBER OF OCCUPANTS \_\_\_\_\_

### IF MULTI-FAMILY BUILDING - COMPLETE THE FOLLOWING:

How many buildings in complex? \_\_\_\_\_    How many units in each building? \_\_\_\_\_

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

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

\*Initial or renewal license fee: \$100    \*\*Inspections: \$65

Single-family, two family, townhouse or condominium: inspection required every three years: (after two failed or non-attended inspections, an additional \$65 will be charged). Multi-family buildings are reinspected every five years.

## Owner Information

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Property Management Information (Vendee information if sold through CD)

Owner \_\_\_\_\_ OR Agent \_\_\_\_\_ (check one)

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

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

### GOVERNMENT DATA PRACTICES ACT – TENNESSEN WARNING:

The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. The data will constitute a public record if and when the license is granted and as such will be available to the general public upon written request. (MN Law M.S.13.41)

### Applicants 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 that a full copy of Chapter 7, Section 11 of the Otsego City Code is available on the Otsego website at [www.otsegomn.gov](http://www.otsegomn.gov).

Signature of owner / agent: \_\_\_\_\_

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



#### For City Use Only:

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

Application approved by: \_\_\_\_\_

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

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