



CITY OF PONTIAC
DPW&U
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING & SAFETY ENGINEERING DIVISION
55 WESSEN STREET
PONTIAC, MICHIGAN 48342
PH: 248-758-2810 / FAX: 248-758-2827

RENTAL REGISTRATION APPLICATION

The Building & Safety Engineering Division will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap, or political beliefs.

NOTE: NO CASH ALLOWED, CHECK OR MONEY ORDER ONLY

A \$100.00 Late Fee Will Be Charged For Non-Registration of Rental Property After May 17, Annually.

I. RENTAL INFORMATION

Registration Number:

Sidwell Number:

Office Use Only

RENTAL ADDRESS:

STATE

COUNTY

MI

OAKLAND

II. RENTAL REGISTRATION FEE SCHEDULE

1. Single Family Dwelling \$ 250.00
2. Two Family Dwelling \$ 300.00
3. Multiple Family (3) Units \$ 350.00

Example: \$200.00 registration fee per building and \$50.00 for each unit.

III. DEFINITION OF AN APARTMENT: An Apartment Is Defined As A Unit.

LATE FEE: Assessed After May 17th, Annually, (Close Of The Business Day).

IV. NUMBER OF BUILDINGS: _____

V. NUMBER OF APARTMENTS PER BUILDING

- | | |
|-----------------------|-------------------------|
| 1. Building # 1 _____ | 6. Building # 6 _____ |
| 2. Building # 2 _____ | 7. Building # 7 _____ |
| 3. Building # 3 _____ | 8. Building # 8 _____ |
| 4. Building # 4 _____ | 9. Building # 9 _____ |
| 5. Building # 5 _____ | 10. Building # 10 _____ |

TOTAL FEES:

The undersigned hereby makes application for registration and certification of compliance in the provisions of Act. No. 167 of the Public Action of Michigan 1917 (MCL 125.401) es seq. MSA 52771 et. Acq. and/or amended, by the City of Pontiac, Chapter 22, Division 6, Section 22-807 "Registration and Certification of Compliance" may be revoked in case of violation(s) and the enforcing officials shall be permitted to inspect said Rental Property as allowed by law.

NO POST OFFICE BOX ADDRESSES ARE ALLOWED, YOU MUST USE YOUR STREET ADDRESS FOR REGISTRATION

VI. OWNER INFORMATION

VIII. MANAGER INFORMATION

Last Name _____ First Name _____

Last Name _____ First Name _____

Home Address _____

Home Address _____

City/State/Zip _____

City/State/Zip _____

Work Number _____

Work Number _____

Home Number: _____

Fax Number: _____

Home Number: _____

Fax Number: _____

Cell Number _____

Cell Number _____

Rev: 11/30/05/del