

## RENTAL REGISTRATION FORM City of Brighton, Michigan



Please complete all information below and sign where appropriate. This form must be resubmitted whenever the owner and/or agent information changes.

Return Application and Required Documents/Fees to: City of Brighton, Planning & Zoning Department, 200 N. First Street, Brighton, MI 48116 - Fax: 810-227-6420 - Phone: 810-227-1911

## <u>Registration Fees - \$30.00 for the first unit in a building/single family unit and \$10.00 for each additional</u> <u>non-owner occupied unit in the building</u>

|  | 1. Type of App  | lication  |  |
|--|---|---|--|
| New Rental Registration Change of Agent  | Change of Contact Inforn<br>Change # Units                            | nation 🗌 Chang  | ge of Owner                              |
|  | 2. Property Info  | rmation   |  |
|  | Street Address  |   |  |
| Type Rental: Single-famil<br>Total Number of Units (includin<br>owner occupied units): |   | Mobile Home<br>Total Number of Rental<br>Units:   | Multi-Unit                               |
|  | 3. Owner(s) Info  | ormation  |  |
| Company Name (if applicable):  |   |   |  |
| Owner Name:  | First   |   |  |
| Address:   |   |   |  |
| Mailing Address (if applicable):   | Street Address  |   | Apartment/Unit #                         |
| City   |   | State   | ZIP Code                                 |
| Phone:   | Email   |   |  |
| Cell Phone:  | Fax:  |   |  |
|  | no, please complete, Section #4<br>ned in this registration form is a | correct. I am responsible for   | r notifying the City                     |
| of any changes regarding own<br>Article VI. I am responsible fo                        |   | e read the City Rental Ordin<br>n within 30 days and for pay<br>valid Certificate of Compliar | nance 564 Sec. 18<br>/ing all inspection |
| Signature of Property Owner:   | 1   | Date:   |  |

## 4. Agent Information (if other than Property Owner) MUST reside within 20 miles of the City of Brighton

| Company Na    | ame (if applicable): _ |   |                                       |                    |
|---------------|------------------------|---|---------------------------------------|--------------------|
| Agent Name:   | Last                   | First   |                                       |                    |
| Address:      |                        |   |                                       |                    |
| Mailing Addre | ess (if applicable):   | Street Address  |                                       | Apartment/Unit #   |
| Ū.            |                        |   |                                       |                    |
|               | City                   |   | State                                 | ZIP Code           |
| Phone:        |                        | Email   |                                       |                    |
| Cell Phone:   |                        | Fax:  |                                       |                    |
|               | l affirm th            | e information contained in this regist                    | ration form is correc                 | ct.                |
| Signature of  | Agent:                 |   | Date                                  |                    |
|               |                        |   |                                       |                    |
|               | 5.                     | Correspondence and Conta                                  | act Information                       |                    |
|               |                        | Send Correspondence / Billir                              | ngs to:                               |                    |
|               |                        | Owner / Agent (circle o                                   | one)                                  |                    |
|               |                        | Contact for Inspection Appoin                             | tments:                               |                    |
|               |                        | Owner / Agent (circle c                                   | one)                                  |                    |
|               |                        |   |                                       |                    |
| 6. C          | Contact Informat       | ion for Person Authorized to<br>different from Owner or I | · · · · · · · · · · · · · · · · · · · | and/or Service (if |
| Company Na    | ame (if applicable):   |   | <b></b>                               |                    |
| Name:         |                        |   |                                       |                    |
| Name.         | Last                   | First   |                                       |                    |
| Address:      |                        | Street Address  |                                       |                    |
| Mailing Addre | ess (if applicable):   | Street Address  |                                       | Apartment/Unit #   |
| 3             |                        |   |                                       |                    |
|               | City                   |   | State                                 | ZIP Code           |
| Phone:        |                        | Email   |                                       |                    |
| Cell Phone:   |                        | Fax:  |                                       |                    |
|               | l affirm th            | e information contained in this regist                    |                                       |                    |
| Signature:    | _                      |   | Date                                  | :                  |

## 7. Rental Unit Information

\_\_\_\_

Number of residential rental buildings at this site:

1<sup>st</sup> Building - Total number of units:

Does the owner reside in one of the units:

| YES N | 0 |
|-------|---|
|       | _ |

If YES, specify the unit number or address:

| Total # of<br>Rental Units<br>in Building | Apartment # or Address of eac                    | h Rental Unit | Max # of<br>People in Each<br>Unit | Size of Habitable<br>Rooms in Each<br>Unit |
|---|--|---------------|------------------------------------|--|
|   |  |               |                                    |  |
|   |  |               |                                    |  |
|   |  |               |                                    |  |
| Does the owner res                        | al number of units:<br>side in one of the units: | YES NO        |                                    |  |
| Total # of<br>Rental Units<br>in Building | he unit number or address:                       |               | Max # of<br>People in Each<br>Unit | Size of Habitable<br>Rooms in Each<br>Unit |
|   |  |               |                                    |  |
|   |  |               |                                    |  |
|   |  |               |                                    |  |
|   |  |               |                                    |  |

| _   | Total number of units:<br>side in one of the units:   | YES N            | 0<br>7                             |  |
|---|---|------------------|------------------------------------|--|
| If YES, specify t                         | he unit number or address:                            |                  |                                    |  |
| Total # of<br>Rental Units<br>in Building | Apartment # or Address of e                           | each Rental Unit | Max # of<br>People in Each<br>Unit | Size of Habitable<br>Rooms in Each<br>Unit |
|   |   |                  |                                    |  |
| Does the owner res                        | - Total number of units:<br>side in one of the units: | YES N            | o<br>]                             |  |
| If YES, specify t                         | the unit number or address:                           |                  |                                    |  |
| Total # of<br>Rental Units<br>in Building | Apartment # or Address of each Rental Unit            |                  | Max # of<br>People in Each<br>Unit | Size of Habitable<br>Rooms in Each<br>Unit |
|   |   |                  |                                    |  |
|   |   |                  |                                    |  |
|   |   |                  |                                    |  |
|   |   |                  |                                    |  |

If there are additional buildings on site, please complete multiple copies of this page.