



RESIDENTIAL RENTAL REGISTRATION LICENSE APPLICATION

CITY ORDINANCE # A-3141 - SUBMIT ONE APPLICATION PER PROPERTY
Return to: Community Development Department, 201 W Poplar St, Sidney, Ohio, 45365

1. PROPERTY LOCATION	NUMBER AND STREET (OR PARCEL #)	
2. PROPERTY OWNER (Sidney CO 1331.01)	NAME	PHONE #
	IF COMPANY, NAME OF CEO/OWNER/PRESIDENT	
	MAILING ADDRESS	CITY / STATE / ZIP
	E-MAIL	
3. COMPANY TYPE	<input type="checkbox"/> CORPORATION <input type="checkbox"/> GENERAL PARTNERSHIP <input type="checkbox"/> LIMITED LIABILITY COMPANY	<input type="checkbox"/> NON-PROFIT <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> OTHER: _____
4. DESIGNATED AGENT (located within 75 miles from the City of Sidney, to be designated if the property owner resides more than 75 miles from corporate limits) (Sidney CO 1331.02)	NAME	PHONE #
	IF COMPANY, NAME OF CEO / OWNER / PRESIDENT	
	PHYSICAL ADDRESS	CITY / STATE / ZIP
	E-MAIL	

5. PROPERTY TYPE	<input type="checkbox"/> SINGLE-FAMILY DWELLING <input type="checkbox"/> TWO-FAMILY DWELLING / DUPLEX <input type="checkbox"/> THREE-FAMILY DWELLING / TRIPLEX	<input type="checkbox"/> 4 OR MORE UNIT APARTMENT COMPLEX (NUMBER OF UNITS: _____) <input type="checkbox"/> RESIDENTIAL DWELLING IN MIXED USE COMPLEX (NUMBER OF UNITS: _____)
6. SAFETY FEATURES INSTALLED (such as smoke detectors, fire extinguishers, carbon monoxide detectors, etc.)		
7. VACANT PROPERTY CLUES (Sidney CO 1329.02 / 1329.03)	<input type="checkbox"/> IF UNOCCUPIED, WHAT WAS THE LAST DATE OF OCCUPANCY? _____ <input type="checkbox"/> IF UNOCCUPIED, ARE THERE ANY UTILITIES STILL CONNECTED TO THE UNIT? <input type="checkbox"/> YES <input type="checkbox"/> NO	

8. ACKNOWLEDGMENT:	
Acknowledgements - by signing and/or submitting the rental registration application:	
<ul style="list-style-type: none">I/we acknowledge, as a rental property owner(s), that it is my/our responsibility to either act as agent or appoint a responsible local agent to ensure that the rental property is maintained according to minimum health, building, and property maintenance standards.I/we acknowledge that it is my/our responsibility to inform the city of any changes to the owner/agent's address, phone number or other information, and to provide any change of information regarding assignment of a local agent.I/we acknowledge that it is my/our responsibility to provide every new occupant with information provided by the City, listing key regulations applying to pertinent local and state laws.I/we understand that failure to register a rental property, whether it is occupied or not, is a misdemeanor offense and may result in fines and/or up to 180 days in jail.	
I hereby attest that the above information is accurate to the best of my knowledge.	
Document Preparer Name: _____ <input type="checkbox"/> DESIGNATED AGENT <input type="checkbox"/> OWNER	
Company: _____	
Address: _____ City: _____ State: _____ Zip: _____	
Signature: _____ Date: _____	