

5959 Main Avenue NE, P.O. Box 9 Albertville, MN 55301 Phone: 763.497.3384

Fax: 763.497.3210

## RENTAL PROPERTY LICENSE APPLICATION 2024 Reference No. R -

Annual F	ee Schedule	Check #
Single Family Duplex/Townhome Per Unit	\$100.00 \$100.00	Total Amt:
Apartment Complex: <i>(per</i> Building <i>plus</i> \$10.00 <i>per</i> Apartme	\$150.00 ent Unit)	
Address of Rental Dwelling:		
Number of Rental Units at Address:	<del></del>	
Name of Rental Dwelling or Complex (If app	licable):	
Owners Name:		
Address:	City	St Zip
Daytime Phone:	Cell Number:	
E-Mail of Owner:		
Property Management Company (If applicat	ole):	
Address:	City	StZip
Contact Person:	Phone	
E-Mail of Contact Person:	Cell Number:	
Name and telephone number of all adult occ	cupants/renter(s) or	the premises.
(Please notify the City of any changes)		
Name:	Phone:	
Name:	Phone:	
Name:	Phone:	
The undersigned hereby applies for a renta Code for Building Maintenance and Occu and maintained accord	upancy, and attests	the subject premises will be operated
Signatures of Owner:	Г	Oate:
		Date:

ALL PROPERTY OWNERS ARE RESPONSIBLE FOR THEIR TENANTS UNPAID WATER BILLS. ANY UNPAID BALANCES WILL BE ASSESSED TO THE PROPERTY TAXES.

The Building Maintenance and Occupancy Ordinance are available at the City Website at www.ci.albertville.mn.us; Owners, agents, and managers should be familiar with its provisions.