

# SAFEbuilt/CITY OF MUSKEGON

933 Terrace St., Room 204, Muskegon, MI 49440

## (RENTAL) DWELLING REGISTRATION - 2016

RENTAL PROPERTY ADDRESS \* \_\_\_\_\_  
NUMBER OF DWELLING UNITS \* \_\_\_\_\_

**NOTE:** Rental Dwelling is defined by our ordinance as any dwelling unit which is not occupied by the owner.

Property Owners Name: \* \_\_\_\_\_  
(If Corporation or Joint Ownership, give name of principal officer or Resident Agent on reverse side)

Owners address: \* \_\_\_\_\_  
\* \_\_\_\_\_

Telephone: \* \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax \_\_\_\_\_

Email Address: \_\_\_\_\_

Drivers License Number: \* \_\_\_\_\_ State: \* \_\_\_\_\_ Date of Birth: \* \_\_\_\_\_

**SIGNED \*** \_\_\_\_\_ **DATE:** \_\_\_\_\_

I hereby certify that I am the owner, or land contract purchaser for the above rental or non-owner occupied property location. Application is hereby made for Rental Dwelling Registration. Chapter 10 of the Muskegon Code of Ordinances requires periodic inspection of rental properties and payment of all fees.

Sec. 10-351 (f) Dwelling Fire Insurance – “the city shall require dwelling fire insurance for all property owners who let for occupancy premises in the city”(1) Minimum coverage; use of insurance proceeds. All property owners owning property in the city shall be required to obtain a minimum of \$10,000 in dwelling fire insurance. (2) Property owners to provide city with insurance information. Effective 1/29/15 – **PROOF OF INSURANCE (COPY OF DEC. SHEET) MUST BE PROVIDED AND KEPT ON FILE**

Insurance Company Name\*: \_\_\_\_\_

Policy Number\*: \_\_\_\_\_ Exp. Date\*: \_\_\_\_\_

**\* INDICATES REQUIRED FIELDS**

**NOTE:** Pursuant to Section 10-351(a) of the city’s property maintenance code, “any owner who does not reside within thirty (30) miles of the city shall designate a responsible local agent who shall be legally responsible for operating such dwelling in compliance with the law, including this code”.

Local Agents Name: \_\_\_\_\_  
(Responsible Party) (If Corporation or Joint Ownership, give name of principal officer or Resident Agent on reverse side)

Local Agents address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Local Agent’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(SEE INVOICE FOR AMOUNT DUE – CHECKS PAYABLE TO: CITY OF MUSKEGON)**

**PROPERTY OWNER INFORMATION** (Corporate Information)

(If Corporation or Joint Ownership give name of principal officer or Resident Agent)

**Property Owners Name:** \_\_\_\_\_

Owners address: \_\_\_\_\_  
 \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**LOCAL AGENT INFORMATION** (Corporate Information)

(If Corporation or Joint Ownership give name of principal officer or Resident Agent)

**Local Agents Name:** \_\_\_\_\_

Local Agents address: \_\_\_\_\_  
 \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Rental Property Registration Per Parcel (Annual)	\$35	Single Unit
Rental Property Registration Per Parcel (Annual)	\$40	Duplex (2 unit)
Rental Property Registration (Annual - Base)	\$50	Multi-Family (3 Units)*
Rental Property Registration (Annual - Per Parcel Over 3)	\$5	*Per Unit Over 3
Late Fee (after 90 days) For Non-Payment Of Rental Registration Annual Fee	\$75	Each Property Address

**CALL 231-724-6766 FOR INFORMATION**



CARD HOLDER NAME: \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_

EXP DATE \_\_\_\_\_ CVV# \_\_\_\_\_

**Minimum \$2.00 convenience fee will be added when processing**