

## RENTAL PROPERTY LICENSE APPLICATION

New License

License Amendment/Supplement

(Complete only those portions necessary to amend/supplement your original Application)

As of January 1, 2016, every owner of a rental dwelling(s) must register the rental dwelling(s) with the City Clerk. (A “rental dwelling” means any property, building or buildings, or portion thereof, that provides shelter for human habitation or residential purpose, any portion of which is leased by the owner for occupation by a tenant; *excluding* hotels, motels, hospitals, State licensed residential care facilities, assisted living facilities or nursing homes, certain types of income restricted property and properties in which both the owner and tenant reside in a single structure, provided that such structure does not contain more than four (4) rental units.)

### Rental Property Information

(Attach additional sheets if needed.)

Rental Property Address: \_\_\_\_\_ Income Restricted?  Yes  No

Street Address	Unit #	City	State	Zip Code
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Rental Property Address: \_\_\_\_\_ Income Restricted?  Yes  No

Street Address	Unit #	City	State	Zip Code
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Rental Property Address: \_\_\_\_\_ Income Restricted?  Yes  No

Street Address	Unit #	City	State	Zip Code
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### Property Owner(s) Information

Type of Property Owner:  Individual/Sole Proprietor  Corporation  LLC

Association  Partnership  Guardian of Estate  Trustee

Personal Representative of Estate  Other (please specify) \_\_\_\_\_

For rental property with multiple owners, please attach information requested below for EACH owner unless the property owner is a business entity; in such event, provide the information below of at least one (1) officer, manager or director of the business entity owner.

Property Owner Name: \_\_\_\_\_

Residential Address of Property Owner:

Street Address	City	State	Zip Code
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Mailing Address (if different from residential address):

Street Address	City	State	Zip Code
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Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

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

**Local Agent**  
**(If Applicable)**

If no owner of the property resides within fifty (50) miles of the City of Edgewater, or if no officer, manager or director of the business entity that owns the property has a business address within fifty (50) miles of the City, the City of Edgewater requires the owner of residential rental property to assign a local agent to act as the representative of the owner on issues related to the rental dwelling and for receipt of notices and legal service of process. For the agent to be considered “local”, the agent must have either a physical residential or business address within fifty (50) miles of the City.

**Please Note:** The Local Agent **MUST** sign below to accept responsibility for service of notices and legal service of process.

Owner designates the below-named person as its Local Agent for the rental properties specified in this Application for those purposes set forth above and as required of an “agent” by Article 12 of Chapter 6 of the Edgewater Municipal Code (“Code”).

Local Agent Name: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
Street Address City State Zip Code

Residential or Business Address (if different from mailing address):

\_\_\_\_\_  
Street Address City State Zip Code

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

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

***I understand and accept the responsibility of being a Local Agent for the rental properties specified in this Application for all purposes required of an “agent” under Article 12 of Chapter 6 of the Code.***

\_\_\_\_\_  
Signature of Local Agent Date

**Oath of Application**

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge and it contains no false, misleading or fraudulent statements. I further acknowledge that it is my responsibility to provide the City with amendments to this application in the event that any information provided is no longer accurate within ten (10) days and that it is unlawful to fail to timely provide such updated information.

Authorized Signature	Printed Name and Title	Date