

VILLAGE OF MILFORD
1100 ATLANTIC STREET, MILFORD, MI 48381

RENTAL REGISTRATION APPLICATION
(FOR 3 OR MORE APARTMENTS ON ONE PROPERTY)

Rental Unit(s) Information: (provide site plan of the property being rented)

Address(s) of units _____

1.) Note the name of the apartment complex _____

2.) Note the zoning district the rental complex is located in _____

3.) Total square footage of each building _____

4.) Provide the number of units per building and a, per floor, layout of each building _____

5.) Square footage of each unit being rented _____

6.) Water Heater (Gas or Electric) _____

7.) Heat (Gas or Electric) _____ Boiler? _____

Owner Information:

Name: _____ Phone _____

Address: _____

If Partnership or Corporation, List Partners or Officers:

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

(if more space is needed provide the information on a separate sheet)

Responsible Local Agent (Manager) Contact:

Name: _____ Phone: _____

Address: _____

I certify that all information herein is a true and complete statement of facts required:

Owner's Signature: _____ Date: _____

Owner's Printed Name: _____