

# BERN TOWNSHIP RENTAL APPLICATION

**\$50 APPLICATION FEE MUST BE SUBMITTED TO BERN TWP WITH APPLICATION AND A \$75.00 PER INSPECTION FEE PER UNIT. REINSPECTIONS ARE \$75 PER INSPECTION.**

**\*OFFICIAL USE ONLY\***

**APPLICATION FEE SUBMITTED**

Date Received: \_\_\_\_\_  
Application fee: \$ \_\_\_\_\_

## RENTAL LICENSE APPLICATION

### A. PROPERTY INFORMATION

Municipality: \_\_\_\_\_ Development: \_\_\_\_\_ Lot: \_\_\_\_\_  
Site Address: \_\_\_\_\_ Tax Parcel ID: \_\_\_\_\_  
Property within Floodplain:  YES  NO

### B. CONTACT INFORMATION

**Applicant Name:** \_\_\_\_\_ email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
**Property Owner:** \_\_\_\_\_ email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### PROPERTY MANAGEMENT INFORMATION

Property Manager: \_\_\_\_\_ email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Names and ages of all tenants and occupants or family members who will occupy property listed in above:**

1.	4.	7.
2.	5.	8.
3.	6.	9.

### C. NUMBER OF RENTAL UNITS ON THE PROPERTY

**RENTAL UNITS ON PROPERTY:**

*Please inspect all rental units before inspection to save time and money. Bring extra batteries for smoke detectors.*

### D. RENTAL INSPECTION SCHEDULING

Preferred Day to Conduct inspection  Any time

<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday
<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	
<input type="checkbox"/> Mornings	<input type="checkbox"/> Afternoons	

I verify that the information contained in this Application is true and correct to the best of my knowledge, information and belief. I understand that I must allow the Bern Township Codes Enforcement Officer to inspect the property listed above, to ensure that such property is compliant with the Bern Township Rental Ordinance and that I must pay the cost of such inspection and repair any items found to be in violation before a Rental Operating License will be issued.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_