

BERN TOWNSHIP RENTAL APPLICATION

\$50 APPLICATION FEE MUST BE SUBMITTED TO BERN TWP WITH APPLICATION AND \$65.00 PER INSPECTION FEE.

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: <input type="checkbox"/> YES <input type="checkbox"/> 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:
<i>Please inspect all rental units before inspection to save time and money. Bring extra batteries for smoke detectors.</i>

D. RENTAL INSPECTION SCHEDULING

Prefered Day to Conduct inspection		<input type="checkbox"/> 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: _____