## CITY OF CLINTON ANNUAL RESIDENTIAL RENTAL PROPERTY REGISTRATION FORM

961 Highway 80 East Clinton, Mississippi 39056 Phone: 601-924-2256 - Fax: 601-924-0837 Rental Property Management

## **Owners Contact Information** Check here if contact information has changed. Owner's Name: Mailing Address: Street Mailing Address:\_\_\_\_ Citv State Zip Code Cell:\_\_\_\_\_ Telephone:\_\_\_\_\_ Fax: E-mail: Local Agent Information: If the Owner does not reside within the city limits of Clinton MS the Owner must provide information for a Local Agent who resides inside the city limits of Clinton MS AND is able to respond reasonably in the event of an emergency on a 24-hour basis. Check here is information has changed. Agent's Name: Mailing Address: Mailing Address: State City Zip Code Telephone: Cell: Fax:\_\_\_\_\_ E-mail:\_\_\_\_ Fee Schedule: Number of units: \_\_\_\_\_\_ @ \$25.00 each Total Amount Due: \$ Unit Type (circle all that apply) Duplex Three-plex Four-plex Multi-Family Single Family

## **Terms of Residential Rental Registration Program**

By signing this form the Owner and Local Agent (if applicable) agree to comply with the following terms:

- NO OWNER SHALL BE ALLOWED TO REGISTER ANY PROPERTY IF THE OWNER HAS OUTSTANDING VIOLATIONS, FEES, AND/OR FINES DUE AND OWING TO THE CITY OF CLINTON.
- Any changes occurring in ownership of a rental unit shall require the new owner to apply for registration within 30 days of taking ownership.
- No rental unit shall be rented or leased or offered for rent or lease in a manner which would result in violation of the occupancy levels permitted by the ICC Property Maintenance Code, or a Certificate of Occupancy.
- Both the interior and exterior of each rental property shall be periodically inspected by the Building Official, under the provisions established by the adopting Ordinance.

## **FAILURE TO REGISTER**

Failure to adhere to these terms and others outlined in the adopting Ordinance may result in violation of the Rental Registration Ordinance and a \$350.00 fine.

I hereby declare under penalty of perjury that all information given on this application for the purpose of securing a Certificate of Residential Rental Registration, and determining the amount due, is true and correct.

Signature of Owner <b>OR</b> Owner's Registere	d Agent Date	
Approved by	DateOffice Use Only	
	CERTIFICATE OF OCCUPANCY	DATE
RENTAL UNIT ADDRESS	NUMBER	ISSUED

RENTAL UNIT ADDRESS	CERTIFICATE OF OCCUPANCY NUMBER	DATE ISSUED
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