

Multiple Family Dwelling (3 or more units in a building)

RENTAL UNIT REGISTRATION FORM

Building Services 500 15TH AVE SW Cedar Rapids, IA 52404
Housing (319) 286-5197 / Fax (319) 286-5830 / CED Main Line (319) 286-5831

CITY ISSUED LANDLORD BUSINESS PERMIT NUMBER _____ - _____

(PLEASE PRINT)

Apartment / Complex Name: _____

Property Office Address: _____
Street City St Zip

Property Office Phone: _____ Fax: _____ Email: _____

Type Rental Unit Property: ___ Apartment; ___ Co-Op = GPN _____; Condo _____
See Inventory B

Date of Last Rental Inspection: _____ Total # of Buildings: _____ Total # of Rental Units: _____
mm/yyyy

Owner Information: _____ Phone #: _____
Name

Address: _____
Street City State Zip

Email Address: _____ Secondary #: _____

(If Applicable)

Property Mgmt / Operator Information: _____
Company Name

Contact Name/Registered Agent: _____; License #: _____

Business Address: _____

Phone # _____ Fax # _____ Cell # _____

Email Address: _____

The person signing this form acknowledges that this property is a residential rental unit and that the owner / operator / Agent has obtained a landlord business permit by the City of Cedar Rapids pursuant to Chapter 29 of the Municipal Code for this activity. Should any registration information change, the Housing Inspections Department shall receive a Change of Information or Deletion Form within thirty (30) calendar days after the change occurs unless prior arrangements are made with this office. Failure to comply with the provisions of this chapter or to falsify any information on this application may result in the revocation, suspension or denial of this registration. Fees, Fines and Penalties will be assessed in accordance to law. Annual Registration Fees = \$25.00 per building + \$8.00 per Unit. Rental Registration fees paid are only good until June 30th. Fees will NOT be pro-rated.

Signature: _____ Date: _____ License # _____
mm/dd/yyyy

NOTE: CONDO Rental Units must be listed on **INVENTORY B**, all others use **INVENTORY A**.

Page _____ of _____

INVENTORY A (used for all units that share a single GPN)

ZIP CODE _____

+++ Type of Rental Unit: _____ Apartment; _____ Co-Op # of Rental Units in the building: _____

Rental Unit Address (s): _____
Street Number(s) Street Name

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Rental Unit Address (s): _____
Street Number(s) Street Name

+++ Type of Rental Unit: _____ Apartment; _____ Co-Op # of Rental Units in the building: _____

Rental Unit Address (s): _____
Street Number(s) Street Name

INVENTORY B (used for all rental *condo* units that have their own GPN)

ZIP CODE _____

Number of Rental Units in the building: _____ Number of Units in building Not Rental: _____

Address: _____ GPN: _____
Street

Number of Rental Units in the building: _____ Number of Units in building Not Rental: _____

Address: _____ GPN: _____
Street

Address: _____ GPN: _____
Street