



# Rental Unit Registration Application

Date Received \_\_\_\_\_

Application Number: \_\_\_\_\_

## Steps in the Registration Process

1. Complete this Registration Application.
2. Submit this application with the registration fee to the Laketown Township Clerk. **(Certification is valid for 2 years)**
3. The Fire Department will be notified and will contact you (or your agent) to schedule an inspection.
4. The Fire Department will notify the Township when the property meets the inspection guidelines.
5. Upon notification of the Township, the Fire Department will send the owner or agent a Rental Certificate.
6. All Assessed Fees for the rental unit, State and Local taxes are paid.

**Rental Property Address:** \_\_\_\_\_ **Parcel #** \_\_\_\_\_

**PROPERTY OWNER'S MAILING ADDRESS:** Name: \_\_\_\_\_

Address/P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby authorize that the agent as listed below is authorized to make this application for short-term rental as my agent and we agree to conform to the all applicable laws and regulations of the Township of Laketown. I additionally grant Laketown Township staff or authorized representatives thereof access to the property to conduct inspections as needed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Responsible Local Agent

Agency Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

## Contact and Other Information:

Who should be contacted to set up the Fire Department inspection? Owner  Agent

Who is the primary contact for questions from the Fire Department? Owner  Agent

How many off street parking spaces are available for renters? \_\_\_\_\_

Number of buildings \_\_\_\_\_ Number of rental units \_\_\_\_\_ Number of bedrooms? \_\_\_\_\_

Sleeps how many? \_\_\_\_\_ Length of lease \_\_\_\_\_ Liability insurance policy \$1,000,000 \_\_\_\_\_

**LOCAL EMERGENCY CONTACT PHONE NUMBER/NAME** \_\_\_\_\_

Please See the Reverse Side for Additional Required Information

*I have read and understand the Laketown Township Rental Unit Ordinance.*

Property owner's name (print): \_\_\_\_\_

Property owner's signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

For Use  
By Twp.:

Fire Dept.  
Notified / / \_\_\_\_

Fire Dept.  
Approved / / \_\_\_\_

Max Occ  
Load \_\_\_\_\_