

RENTAL REGISTRATION FORM CHANGE OF TENANT FORM

CITY OF DEARBORN HEIGHTS
DEPARTMENT OF BUILDING AND ENGINEERING
6045 FENTON
DEARBORN HEIGHTS, MI 48127
313-791-3470

RENTAL REGISTRATION FEE: \$50.00 EACH PROPERTY (ONE TIME FEE ONLY)

ADDRESS OF RENTAL PROPERTY _____

TENANT NAME _____

OWNERS NAME _____

OWNERS HOME ADDRESS _____

CITY _____ STATE _____

ZIP _____ PHONE # _____

I, OWNER OF THE ABOVE PROPERTY, UNDERSTAND THAT IT IS MY RESPONSIBILITY TO MAINTAIN THE INTERIOR AND EXTERIOR OF THE STRUCTURE AND THAT THE EQUIPMENT THEREIN SHALL BE MAINTAINED IN GOOD REPAIR, STRUCTURALLY SOUND AND IN SANITARY CONDITIONS. I FURTHER ACKNOWLEDGE THAT SECTION 7-621 OF THE CITY ORDINANCE REQUIRES A RENTAL COMPLIANCE CERTIFICATE TO BE COMPLETED EVERY 3 YEARS.

SIGNATURE OF OWNER DATE

FOR OFFICE USE ONLY:

RECEIPT # _____ REGISTRATION \$ _____