

Rental Inspections Department 2010 South Lincoln Mt. Pleasant, MI 48858 Phone (989) 772-4600 Ext. 236/242

New Registration	Registration Renewal	Change in Owner/Agent	Information Updates
OWNER INFORMATION			
Name:			
Mailing Address:			
		Email:	
LOCAL AGENT/PROPERTY (Must be within 45 min response)	se time in case of emergency)		
Mailing Address:			
		ail:	
RENTAL PROPERTY INFOR	MATION		
Property Address:			
Parcel Tax ID #:			
SINGLE FAMILY	DUPLEX (two-family)	3 + UNITS HOTEL /	MOTEL
MULTI UNIT PROPERTIES C	ONLY:		
Number of buildings in cor	nplex Numbe	er of units in each building	
Any units owner-occupied	Total number	of units for certification	

APPLICATION AFFIDAVIT:

I hereby attest to the truth and accuracy of the information contained in this application and grant the Charter Township of Union permission to conduct any and all inspections required and affirm that all tenants of the subject property will be informed of required and scheduled inspections. I acknowledge that it is my responsibility to schedule an appointment for a housing inspection and to complete all repairs necessary for the issuance of a Certificate of Compliance with the Union Township House Code; that it is my responsibility to schedule all necessary re-inspections and/or future certification renewal inspections prior to expiration of the Certificate of Compliance; and that have read the information for Rental Registration form.

SIGNATURE:	DATE:
PRINT NAME:	