

CITY OF PONTIAC  
 Department of Building Safety  
 47450 Woodward Avenue  
 Pontiac, MI 48342  
 Ph: 248-758-2800 / Fax: 248-758-2827

**Rental Registration Application (3 units or more)**  
**Must fill out form completely**

RENTAL ADDRESS: \_\_\_\_\_ Parcel # \_\_\_\_\_

Number of Buildings: \_\_\_\_\_ Total Fee: \_\_\_\_\_

Number of Apartments per building:

Building # _____	Building # _____	Building # _____	Building # _____
Building # _____	Building # _____	Building # _____	Building # _____
Building # _____	Building # _____	Building # _____	Building # _____

Fee Schedule

Rental Registration Fee per building.....	\$300
Triennial Inspection Fee/Change of Tenant Fee (requires reinspection) per unit.....	\$100
Special Inspection Fee.....	\$75
Late Fee (per unit/per month before inspection).....	\$25
Replacement Certificate of Compliance Fee.....	\$10
Reschedule Fee (if appointment is cancelled less than 48 hours prior to appointment).....	\$10
Change of property management company fee.....	\$150.00
Change an active registered vacant property to rental.....	\$50.00
Tenant Verification – through December 31, 2013.....	\$75.00
Tenant Verification – effective January 1, 2014.....	\$50.00

All registration and inspection fees must be paid before inspection. Late Fee: Assessed annually after due date, at the close of business day. The undersigned hereby makes application for registration and certification of compliance in the provisions of Act. No. 167 of the Public Action of Michigan 1917 (MCL 125.401) et seq. MSA 52771 et. Acq. and/or amended, by the City of Pontiac, Ordinance No 2246 "Registration and Certification of Compliance" may be revoked in case of violation(s) and the enforcing officials shall be permitted to inspect said Rental Property as allowed by law.

**NO POST OFFICE BOX ADDRESSES ARE ALLOWED, YOU MUST USE YOUR STREET ADDRESS FOR REGISTRATION**

OWNER INFORMATION

MANAGER INFORMATION

\_\_\_\_\_  
 Last Name First Name  
 \_\_\_\_\_  
 Owner's Address  
 \_\_\_\_\_  
 City/State/Zip  
 Office Number \_\_\_\_\_

\_\_\_\_\_  
 Last Name First Name  
 \_\_\_\_\_  
 Manager's Address  
 \_\_\_\_\_  
 City/State/Zip  
 Office Number \_\_\_\_\_

Home Number \_\_\_\_\_  
 Cell Number \_\_\_\_\_  
 Driver's License # \_\_\_\_\_  
 Federal ID# or SS# \_\_\_\_\_

Home Number \_\_\_\_\_  
 Cell Number \_\_\_\_\_  
 Driver's License # \_\_\_\_\_  
 Federal ID# or SS# \_\_\_\_\_

This information is not for publication.

I affirm that all current property taxes, water/sewer bills, and Pontiac Income Taxes are current.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Return to: City of Pontiac, Dept. of Building & Safety  
47450 Woodward Ave.  
Pontiac, MI 48342

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Property Address: \_\_\_\_\_ Bldg. Sub Address: \_\_\_\_\_

## INCOMPLETE FORMS WILL NOT BE PROCESSED

See other side

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Name: \_\_\_\_\_

Apartment # \_\_\_\_\_ Phone # \_\_\_\_\_ Birthdate \_\_\_\_\_

# of occupants: \_\_\_\_\_