



**CITY OF WYANDOTTE, MICHIGAN**

3200 BIDDLE AVENUE 48192 • CLERK'S OFFICE: (734) 324-4560 • CLERK'S FAX: (734) 324-4568

**REGISTRATION OF RENTAL DWELLINGS & RENTAL UNITS  
PURSUANT TO CHAPTER 31.1 OF THE CODE OF ORDINANCES**

1. Address of Rental Dwelling or Rental Unit: \_\_\_\_\_

**2. Names, Addresses, and Phone Numbers of all Owners of the Rental Dwellings:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

**3. Authorization Appointing a Responsible Local Agent, Signed by One or More of the Owners and the Responsible Local Agent:**

I, \_\_\_\_\_, hereby appoint \_\_\_\_\_ as the individual legally  
**OWNER** **RESPONSIBLE LOCAL AGENT**

responsible for operating the above registered rental dwelling or rental unit and said Agent shall also be responsible for providing access to such premises for making the Inspections necessary to insure compliance with the terms of Chapter 31.1 of the Wyandotte Code of Ordinances and all applicable Codes and Ordinances adopted by the City of Wyandotte.

**Signed:**

\_\_\_\_\_  
**OWNER**

\_\_\_\_\_  
**RESPONSIBLE LOCAL AGENT**

**4. Responsible Local Agent:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

I, \_\_\_\_\_ hereby swear or affirm that aforementioned facts are provided to  
**RESPONSIBLE LOCAL AGENT**

the best of my knowledge. I further understand that I am to apply for a Certificate of Compliance with the Department of Engineering and Building and acknowledge that I have read and received a copy of Chapter 31.1 of the Code of Ordinances requiring the registration and obtaining of the Certificate of Compliance for all rental dwellings and rental units in the City of Wyandotte.

To be signed in the presence of a Notary Public:

DATE \_\_\_\_\_ APPLICANT \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

\*\*\*\*\*

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Seal:

\_\_\_\_\_  
Notary Public  
Wayne County, Michigan

My Commission Expires : \_\_\_\_\_

Attachment (Ordinance)

**NOTE:** A fee of \$35.00 for each rental dwelling registered shall be paid at time of registration.  
Make check or money order payable to the City of Wyandotte and forward to:

**City Clerk's Office  
Wyandotte City Hall  
3200 Biddle Avenue  
Wyandotte, Michigan 48192**

\*\*\*\*\*

FOR OFFICE USE ONLY: \_\_\_\_\_

RECEIPT #: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

cc: Engineering & Building Department