



CITY OF RIVERVIEW
BUILDING and ENGINEERING DEPARTMENT

RENTAL PROPERTY APPLICATION

PROPERTY DESCRIPTION:

RENTAL PROPERTY ADDRESS: _____ DATE: _____

PARCEL NUMBER ID: 51 - _____ - _____ - _____ - _____

_____ Single Family Residence

_____ Two Family Dwelling (Percentage Owner Occupied: _____%)

_____ Multiple Residential Occupancy

_____ Number of Units _____ Number of Occupied Buildings

_____ Approximate Date of Purchase

OWNERSHIP INFORMATION:

Name: _____ Telephone: _____

Address: _____ City: _____

State: _____ Zip: _____

Telephone: _____ Cell: _____

Email: _____

MANAGEMENT INFORMATION:

Management Company: _____

Address: _____ City: _____

State: _____ Zip: _____

Telephone: _____ Cell: _____

Corp. Officer/Partner: _____

Manager: _____ Telephone: _____

Email: _____

RESPONSIBLE LOCAL AGENT:

Name: _____ Telephone: _____

Address: _____ City: _____

State: _____ Zip: _____

Telephone: _____ Cell: _____

Email: _____

The undersigned hereby certifies that they are the owner(s) (qualified officer if corporately owned) or (Responsible Local Agent) of the described property and that they have received a copy of the City of Riverview Rental Inspection Ordinance and that the information provided herein is complete and accurate to the best of their knowledge.

Owner Signature: _____

Responsible Local Agent: _____

Manager: _____