

Date Paid: \_\_\_\_\_  
Amount: \_\_\_\_\_  
Cash or Check # \_\_\_\_\_



City of Ithaca  
129 W. Emerson St.  
Ithaca, MI 48847  
(989)875-3200  
ehunter@ithacami.com

## Rental License Application

### Rental Property Information

PARCEL ID \_\_\_\_\_

Select Building Type:

\_\_\_\_ Single Family Dwelling    \_\_\_\_ Apartment Complex    \_\_\_\_ Mixed Use (attached to a business)  
\_\_\_\_ Multi Family Structure    \_\_\_\_ Duplex    \_\_\_\_ Other \_\_\_\_\_

Number of Buildings: \_\_\_\_\_    Number of Rental Units: \_\_\_\_\_

Complex Name (if applicable) \_\_\_\_\_

Corresponding house/apartment numbers included with this rental property (if applicable) \_\_\_\_\_

### Property Owner Information

Contact Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

\*\*The City may utilize this to keep you informed and updated as needed

### Property Manager (that serves as responsible party for any correspondence concerning this property)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Contact Phone Number \_\_\_\_\_

Management Company (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ \*\*The City may utilize this to keep you informed and updated as needed

I hereby swear or affirm that I am the \_\_\_\_\_ owner or \_\_\_\_\_ property manager of the above property and that the statements contained in this application are true.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Rental Housing License Application Fees

- \* *Single Family Unit - \$40*
- \* *each additional unit - \$5*
- \* *Re-inspections (per unit)- \$30 (commencing with the third re-inspection and every one thereafter)*

**\*\*Rental Fee is due by December 31  
after which the Rental Fee will be penalized 25% of original bill per month for the next four months**