



Rental Housing Department
6676 Lake Michigan Drive PO Box 539
Allendale MI 49401
(616)895-6295 Ext. 1106

Application for Certificate of Compliance

Certificate No. _____ (For Office Use Only)
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Application Date _____

RENTAL PROPERTY INFORMATION

Street address of rental property
Number of units (house = 1 unit, duplex = 2 units, etc.)
Classification of rental property (House, Duplex, Apartment)
Yearly Application Fee: \$10.00/Unit due by March 31 *failure to pay on time will result in your C.O.C. being revoked

OWNER INFORMATION

Name of Registered Owner(s)	
Mailing Address	
City/State/Zip	
Home Phone	Cell
Email Address	

RESPONSIBLE AGENT INFO (If applicable) All correspondence will be directed to this address only

Agency Name:	Agent Name
Office Mailing Address	
City/State/Zip	
Office Phone	Agent Cell
Office email	Agent Email

Owner/Agent Print Name

Signature

Date

Make checks payable to Allendale Charter Township
Now accepting online Credit Card payments at www.allendale-twp.org