

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

Owner or Agent Printed Name

Application Date		
RENTAL PROPERTY INFORMA	ATION	
Street address of rental property		
Number of units (house & Condo = 1	unit, duplex = 2 units, etc.)	
Classification of rental property (house	e/condo/duplex/apartment)	
Is this an owner-occupied duplex?	YES NO	
Annual Registration Fee Amount Du *failure to pay on time may result in your C.O.		
OWNER INFORMATION		
Name of Registered Owner(s)		
Mailing Address		
City/State/Zip		
Home Phone	Cell Phone	
Email Address		
	applicable) All correspondence will be directed ONLY to the agent	t.
Business Name:	Agent Name	
Business Mailing Address		
City/State/Zip		
Business Office Phone	Agent Cell	
Office email	Agent Email	

Signature

Date