



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 within rental property
Classification of rental property (ie: Apartment, Condo, Duplex, House, Townhouse)
<b>Yearly Application Fee: \$10.00/Unit due by March 31</b> *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 Number	Cell Phone Number
Email Address	

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

Name of Agent			
Mailing Address			
City/State/Zip			
Phone Numbers	Home:	Work:	Cell:
Email Address			

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Make checks payable to Allendale Charter Township**  
Now accepting online Credit Card payments at [www.allendale-twp.org](http://www.allendale-twp.org)