

City of Iron Mountain

Rental Housing Registration Form

PLEASE COMPLETE ALL OF THE FOLLOWING:

Rental Property Address:

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Owner's Name & Address:

Name:		
Address:		
City:		
State:		Zip:
E-Mail:		Fax:
Contact Numbers:		
Home:	Work:	Cell:

Owner acts as both owner and operator/manager

☐

Operator/Manager's Name & Address:

Name:		
Address:		
City:		
State:		Zip:
E-Mail:		Fax:
Contact Numbers:		
Home:	Work:	Cell:

Has this property been registered previously?

Yes ☐

No ☐

Has this property been inspected previously?

Yes ☐

No ☐

Fees per Address:

Type of Dwelling:

- ☐ Single Dwelling
☐ Duplex
☐ Multi-Dwelling

Number of Units: _____

(Cost Per Unit)

Inspection (Initial) - \$50.00 _____

Inspection (Reinspection) - \$40.00 _____

Total _____

Name: _____

Title: _____

Date: _____

Contact information must be
kept current during
registration period.