

2026 RESIDENTIAL RENTAL REGISTRATION FORM

Registration Form *Must* Accompany Payment

Please send registration form and fee to:

City of Grand Haven

525 Washington, Grand Haven, Michigan 49417

Email: rentalregistration@grandhaven.org

Phone: (616) 842-3460

Date: _____

SECTION 1 – RENTAL PROPERTY INFORMATION

Rental Property Address: _____

Number of rental units: _____ Do you reside in one of the units?: ☐ Yes ☐ No

Number of parking spaces: _____ City Planner Verification (**Office Use Only**): ☐ Yes ☐ No

Certified as: ☐ Long Term ☐ Short Term (Short Term requires Planning Dept. approval)

Current Certificate of Compliance Expiration Date: _____

Is this the first time you are registering this property as a rental?: ☐ Yes ☐ No

SECTION 2 – OWNER INFORMATION

Owner's Name: _____

Owner's Address: _____

Owner's City/State/Zip: _____

Home/Cell Phone: _____

Email address: _____

Preferred method of communication for inspection notices: ☐ Owner ☐ Agent **via:** ☐ Email ☐ US Mail

SECTION 3 – PROPERTY MANAGER OR LOCAL AGENT *(Required if you live more than 60 miles outside the city limits)*

Company Name: _____

Contact Person: _____

Manager/Agent Address: _____

Manager/Agent City/State/Zip: _____

Home/Cell Phone: _____

Business Phone: _____

Fax Number: _____

Email address: _____

SECTION 4 – FEES (As established by City Council)

A \$50.00 late fee **per** rental unit, **per** month will be assessed if the registration form and fee is received after February 15, 2026

Long Term: \$115.00 **per** rental unit. **Short Term:** \$165.00 **per** rental unit.

Initial Registration Fee: \$525.00 **per** rental unit. Any unit being registered for the first time or upon transfer of ownership. This fee includes one inspection.

SECTION 5 – DISCLAIMERS

By signing below, I hereby affirm that the above information is true and correct.

Date _____ Signature of Owner/Agent _____

*****If you no longer own this property or it is no longer a rental unit, please note the change in the space directly below, sign and date in the above spaces, then mail the form back and we will update our records. Thank you*****