

Rental License Application

Condominium, Townhouse or Cooperative Rental Units

Please see instructions on back of form

Section 1 Rental Property Information

Rental Property Address _____

Rental Unit Number(s) _____

Property Identification Number (PIN) _____

**If you are licensing more than 3 units please attach a document listing all of the unit numbers and their property ID numbers.*

Section 2 Owner Information

Name of Owner _____

First MI Last

Business Name (if applicable) _____

(Submission of Articles of Organization listing the Owner is required at time of application)

Address of Owner _____

(Address cannot be a P.O. Box or commercial mailing service)

City _____ County _____ State & Zip Code _____ Phone _____

Date of Birth _____ E-mail _____

I AFFIRM BY MY SIGNATURE BELOW THAT I AM IN COMPLIANCE WITH ALL RENTAL LICENSING STANDARDS OUTLINED IN MINNEAPOLIS CODE OF ORDINANCES, TITLE 12, CHAPTER 244. AND UNDERSTAND THAT FAILURE TO COMPLY WITH ANY OF THESE STANDARDS AND/OR CONDITIONS SHALL BE ADEQUATE GROUNDS FOR THE DENIAL, REFUSAL TO RENEW, REVOCATION, OR SUSPENSION OF MY RENTAL DWELLING LICENSE. I ACKNOWLEDGE THAT THE PHONE NUMBER SUBMITTED SHALL BE ANSWERABLE 24 HOURS A DAY, 7 DAYS A WEEK AND ALL INQUIRIES MUST BE RESPONDED TO WITHIN A REASONABLE AMOUNT OF TIME.

I ACKNOWLEDGE THAT ALL CORRESPONDENCE SENT FROM THE DEPARTMENT OF INSPECTIONS WILL BE MAILED TO THE APPOINTED AGENT/CONTACT PERSON IF LISTED BELOW

THE OWNER SHALL NOTIFY THE DEPARTMENT OF INSPECTIONS IN WRITING WITHIN 14 DAYS OF ANY CHANGES IN THE NAMES, ADDRESSES AND OTHER INFORMATION CONCERNING THE LAST LICENSE APPLICATION FILED WITH THE DEPARTMENT

Signature of Owner _____ Date _____

Section 3 Appointed Agent/Contact Person

This person must reside within the 16-county metropolitan area (LIST OF COUNTIES ON BACK)

Name of Appointed Agent/Contact Person _____

First MI Last

Address of Agent/Contact Person _____

(Address cannot be a P.O. Box or commercial mailing service)

City _____ County _____ State & Zip Code _____ Phone _____

Date of Birth _____ E-mail _____

I AFFIRM BY MY SIGNATURE BELOW THAT I AM IN COMPLIANCE WITH ALL RENTAL LICENSING STANDARDS OUTLINED IN MINNEAPOLIS CODE OF ORDINANCES, TITLE 12, CHAPTER 244. AND UNDERSTAND THAT FAILURE TO COMPLY WITH ANY OF THESE STANDARDS AND/OR CONDITIONS SHALL BE ADEQUATE GROUNDS FOR THE DENIAL, REFUSAL TO RENEW, REVOCATION, OR SUSPENSION OF MY RENTAL DWELLING LICENSE. I ACKNOWLEDGE THAT THE PHONE NUMBER SUBMITTED SHALL BE ANSWERABLE 24 HOURS A DAY, 7 DAYS A WEEK AND ALL INQUIRIES MUST BE RESPONDED TO WITHIN A REASONABLE AMOUNT OF TIME.

I ACKNOWLEDGE THAT THE DEPARTMENT OF INSPECTIONS WILL HOLD ME RESPONSIBLE FOR THE MAINTENANCE, MANAGEMENT, AND ANY LEGAL ACTIONS THAT MAY ENSUE FOR THE ABOVE LISTED RENTAL PROPERTY.

I AGREE THAT ALL CORRESPONDENCE SENT FROM THE DEPARTMENT OF INSPECTIONS WILL BE MAILED TO ME AS THE APPOINTED AGENT/CONTACT PERSON AS LISTED IN THIS SECTION

Signature of Appointed Agent/Contact Person (MUST BE NOTARIZED) _____ Date _____

Subscribed and sworn to before me on this _____ day of _____, 20____.

Notary Public, _____ County

Space Reserved for Notary Stamp

Section 4

Rental Licensing Fees

Rental Licensing fees are payable to: Minneapolis Finance Department

Application submission to:

Department of Regulatory Services
Rental Licensing
250 South 4th Street, RM 300
Minneapolis, MN 55415

Instructions

Section 1

- **Residential Rental Unit:** A single residential unit which contains a sleeping area, a kitchen and bathroom facility
- **Rooming Rental Unit:** Any single rental unit legally approved by the City of Minneapolis, intended to be used for living and sleeping but does not contain a kitchen
- **Shared Bath Rental Unit:** A unit legally approved by the City of Minneapolis, that contains a kitchen but no bathroom

Section 2

- Application **will not** be accepted if incomplete-**all fields required**

Section 3

- Application **will not** be accepted if incomplete-**all fields required**
- Signature Appointed agent/contact person **must be notarized**
- This person must reside within the 16-county metropolitan area of: Anoka, Carver, Chisago, Dakota, Goodhue, Hennepin, Isanti, Lesueur, Mcleod, Ramsey, Rice, Scott, Sherburne, Sibley, Washington Or Wright

Section 4

- Questions regarding fee amounts or if fees apply please call 612-673-3000 or 311

Important Rental Property Information

- A rental dwelling license is no longer valid if ownership has changed
- Rental Licenses are renewed annually, expiring August 31st of each year
- The owner of any dwelling selling a rental property must notify the buyer in writing of all unabated orders and administrative citations issued by the Department of Inspections pertaining to the property and notify the buyer of the rental licensing requirements as set out by Minneapolis Ordinances
- Licensing Standard 244.1910 Subsection (20) A licensee or owner/landlord shall not be in violation of section 244.265 of this Code, which required owner/landlords to notify tenants and prospective tenants of pending mortgage foreclosure or cancellation of contract for deed involving the licensed property
- All Rental Licensing Standards are outlined in Minneapolis Code of Ordinances, Title 12, Chapter 244.

Spanish- Atención. Si desea recibir asistencia gratuita para traducir esta información, llama **612-673-2700**

Somali- Ogow. Haddii aad dooneyso in lagaa kaalmeeyo tarjamadda macluumaadkani oo lacag la' aan wac **612-673-3500**

Hmong-Ceeb toom. Yog koj xav tau kev pab txhais cov xov no rau koj dawb, hu **612-673-2800**

Sign Language Interpreter- **612-673-3220 TTY: 612-673-2626**