



# City of New Hope Community Development

4401 Xylon Ave N • New Hope MN 55428 • Phone: 763-531-5110 • Fax: 763-531-5136 • ci.new-hope.mn.us

## Rental Registration Application (1-2 unit)

### Rental Property

Complex Name \_\_\_\_\_

Address(es) \_\_\_\_\_

PID \_\_\_\_\_

Single Family    Condo    Townhome    Duplex    Services

**Owner** *Social Security Number, Federal Tax or MN Business Tax ID required*

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_ Social Security Number \_\_\_\_\_

Federal Tax ID \_\_\_\_\_ MN Business Tax ID \_\_\_\_\_

**Additional Owner(s)** *Include all owners and officers of rental dwelling*

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Partnership    Corporation    Company    Other \_\_\_\_\_

### Fee Schedule

First year annual registration is included in conversion fee

Per Rental Unit            \$750

Two Units                    \$1,500

Payment Submitted by \_\_\_\_\_

### Rebates

*\$250 per rebate*

- Property owner or owner's agent attends Minnesota Multi Housing Association class "The Fundamentals of Rental Property Management in Minnesota" and provides proof of attendance to the city within the previous six months or subsequent six months of the property's conversion to rental and there have been no reports of disorderly behavior per section 3-31 (i) of the City Code against any properties owned by the same property owner in the city within the previous 12 months. Classes are conducted by MHA several times throughout the year. Visit mmha.com or call 952-854-8500 for more information.
- Property remains free of any disorderly behavior complaints for a period of 18 months after initial registration.

### Notice to Owner

*Completed by one owner only*

The undersigned hereby applies for a rental registration permit and acknowledges receipt of requirements excepted to perform as described in the City Ordinance Code book; and attests the subject premises will be operated and maintained according to the requirements contained therein, subject to applicable sanctions and penalties. The undersigned further agrees the subject premises may be inspected by the compliance official.

➡ Owner Signature \_\_\_\_\_ Date of Application \_\_\_\_\_

### Notice to On-Site Property Manager

In cases where the owner of a rental dwelling does not reside in either Hennepin, Ramsey, Anoka, Carver, Dakota, Scott, or Washington County, the registration shall be made by an operator who shall be legally responsible for compliance with this and all other applicable ordinances and such operator shall reside within one of the aforementioned counties.

➡ Property Manager Signature \_\_\_\_\_ Date of Application \_\_\_\_\_

### Payment

*Make checks payable to City of New Hope or complete information below*

Name (print) \_\_\_\_\_

Billing Address \_\_\_\_\_

Credit Card Account Number \_\_\_\_\_

Signature \_\_\_\_\_

Expiration Date \_\_\_\_\_

License # \_\_\_\_\_

Received Application \_\_\_\_\_

Received Payment \_\_\_\_\_

*For Office Use*

**On-Site Property Manager** *List property manager not listed as owner*

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Partnership    Corporation    Company    Other \_\_\_\_\_

### Fees

<b>Fees Due Upon Application (9001.4531)</b>	
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