



City of Nevis, 104 Main Street West, Nevis, MN 56467

APPLICATION FOR RENTAL LICENSE

License will not be processed unless application is completely filled out and returned to City Hall with full payment.

Address of Rental: _____

Name of Owner: _____

Address of Owner: _____

Phone number: _____

Read the following carefully before checking which type of rental unit applies. Check only one and complete the questions for that section.

Single – or Two-Family Dwelling: _____ Single Family _____ Two Family _____ Total Occupants

Multiple Family (triplex, fourplex, or greater):

Number of units _____ Number of Occupants in each unit _____

Numbers of units which are: _____ 1 bedroom, _____ 2 bedroom, _____ 3 bedroom, _____ Other

Do renters share any common areas? _____ Yes _____ No

If yes, which areas? _____

Mobile Homes:

Number of bedrooms _____ Size of structure _____ Total Occupants _____

Year mobile home was manufactured: _____ Make of mobile home: _____

Model of mobile home: _____ Serial number of mobile home: _____

I hereby certify that all information contained herein is true and accurate. I hereby grant permission to the City of Nevis to make inspections of the structure(s) listed herein to determine if in compliance with City Codes. I agree to maintain the premises to standards which are set forth by the City of Nevis. I understand that my failure to comply with these requirements will result in a monetary fine or revocation of the license.

The owner agrees to promptly notify the city of any changes of transfer of ownership. I understand that payment made with this application has been accepted for the purpose of applying for a rental license and that such acceptance does not constitute an automatic granting of rental license. The rental of the property

is not permitted until the final inspection has been performed and approved by the City Building Inspector. I also understand that the application fee will not be refunded if a rental license is denied due to the failure of the property to comply with the city “Rental” Ordinance. The application will not be processed without signatures.

Applicant’s Signature

Date

Date Paid: _____

Amount Paid: _____

Payment Method: _____