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|  | Charter Township of Kalamazoo | |  |
| Property address | 1720 Riverview Drive | | Parcel#\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Kalamazoo, MI 49004 | | Registration Period |
|  | (269) 381-8080 | | **January 1, 2023 to December 31, 2023** |
|  |  | |  |
|  | **Rental Dwelling Registration** | | Registration expires upon transfer of ownership or end of registration period, whichever is earlier |
| Pursuant to the Kalamazoo Township Rental Properties Maintenance Ordinance 551, all dwellings leased or occupied for rental purposes must be registered with the Township. Please complete this Rental Registration and return to Kalamazoo Township 1720 Riverview Dr. Kalamazoo, MI 49004, along with the $25 annual registration fee. | | | |
| Property Owner(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | If this form was sent to you in error or the dwelling is no longer a rental, please complete reverse side of this form – “**Property** **is not a rental**” section and return to the Township. | |
| Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |
|  | | |  |
|  | **Property Owner’s Information** | |  |
| Driver’s License #, State Id or Corp Id# | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | |  |
|  |  | | Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email Address: |  | |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | Business Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Property Management Information** | |  |
| Property Management contact name designated by owner, if any | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Driver’s License #, State Id or Corp Id# | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| Address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | Business Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Rental Property Information** | |  |
| Number and location of off street parking spaces available for dwelling? \_\_\_\_\_\_\_\_\_\_  Attach sketch of off-street parking, if applicable. | | |  |
| Number of residential units in dwelling? | \_\_\_\_\_\_\_ | |  |
| Number of sleeping rooms contained on each floor within each rental unit? | First Floor \_\_\_\_\_  Second Floor \_\_\_\_\_ | | Third Floor \_\_\_\_\_  Basement \_\_\_\_ |
| Maximum number of tenants owner will allow to occupy each rental unit? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| Will subletting be permitted by any tenants? | Yes | | No |
|  | | | |

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| --- | --- |
|  | Parcel# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| The undersigned hereby submits this rental dwelling registration for the above dwelling and agrees to permit the Township Official or other official designated by the Township Board to enter and inspect said dwelling during reasonable daylight hours, to ascertain compliance with Township Ordinances upon reasonable prior notice to the Owner(s) or Tenant(s) of the dwelling to be inspected. Further, the undersigned hereby states that above responses are true to the best of their knowledge and acknowledge that any untruthful response shall constitute a violation of the Kalamazoo Township Rental Properties Maintenance Ordinance and may be deemed responsible for a municipal civil infraction as defined by Michigan statue which shall be punishable by a civil fine. | | |
| Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Owner/Legal Agent signature  Must be signed in ink! | Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

**Property is not a rental**

If this property, XXXXXXXXXXXXXXXXXXXX, is not a rental unit, please note any changes in the property’s status in the space below, sign and date. Please return completed form to: Kalamazoo Township 1720 Riverview Dr. Kalamazoo, MI 49004 and we will update our records. Please be advised that this form will need to be update every year. Thank you.

Reason for change\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The undersigned hereby states that the above responses are true to the best of their knowledge and acknowledge that any untruthful response shall constitute a violation of the Kalamazoo Township Rental Properties Maintenance Ordinance any may be deemed responsible for municipal civil infractions as defined by Michigan statue which shall be punishable by a civil fine.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_

Must be signed in ink!

|  |
| --- |
| Township Office Receiving Record-Township use only |
| Receipt #\_\_\_\_\_\_\_\_\_\_\_\_  Above dwelling is hereby registered with the Charter Township of Kalamazoo  Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Initials\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |