

# **Long-Term Rental Registration**

Process, Instructions and Application

# • Submission of Application

If determined to be an allowed use, complete the application with all required documents and submit to the City of New Buffalo.

# Acceptance of Application

City staff reviews the application and any supplemental information for completeness prior to formally accepting the application(s). All fees must be paid at this time.

# • Formal Acceptance of Application

Accepted application will be forwarded to the Code Enforcement Officer for review and formal approval.

#### Rental Inspection Scheduled

The Code Enforcement Officer shall consult with the Rental Inspector to schedule a date and time for the annual inspection of the rental unit to occur.

#### Property Inspection

City staff will meet the owner or representative on-site at the designated date and time. The interior and exterior of the building to be rented will be inspected per the adopted International Property Maintenance Code and the requirements of the Code of Ordinances of the City of New Buffalo. At the completion of the inspection, city staff will notify the owner or representative if the property passes or fails the inspection.

## • Correction Notice Issued

If the property does not pass the inspection, the city shall provide the owner or representative with a written list of the specific violations that will need to be corrected prior to rental of the property, issuing of a Certificate of Occupancy, and issuance of a Rental Certificate of Compliance.

## Rental Compliance Certificate and Certificate of Occupancy issued

Once all outstanding issues have been satisfactorily addressed, the city issues a Certificate of Occupancy, and a Rental Certificate of Compliance which is valid for one (1) year. If the property is sold or there are changes that occur, the application shall be updated within thirty (30) days of the closing or when change occured.



# **Application for Long-Term Rental Registration**

224 W. Buffalo Street

New Buffalo, Michigan 49117

City Hall: 269-469-1500 Facsimile: 269-469-7917

www.cityofnewbuffalo.org

Approved Denied

Certificate Number Fee Paid

City Staff Name & Date of Receipt

Applicants may register online or in person at the above address. Please print legibly and all portions must be completed, as incomplete forms will be returned. Please allow ten (10) business days for processing.

Property Address:					
Property Code Number (Tax ID): 11-62-					
Type of Property (pick only o	one):				
Single-Family Resided Apartment Completed Number of Builded Do you permanent Unit Information (	dence 🗌 Duplex 🔲 Ti	riplex   Other			
☐ Apartment Comple	ex				
Number of Buildings Number of Dwelling Units					
Do you permanent	tly reside in one of the dwelling units:	☐ Yes ☐ No			
Unit Information (	Unit Information (one form must be completed for each unit in a building)				
Unit Number		Total Number of Units in Building:			
Number of Bedroo	oms in Unit:	Number of Parking Spaces for Unit:			
Dimensions of each	h bedroom: (example 11'6" x 13'9")				
Bedroom #1:		Bedroom #3:			
Bedroom #2:		Bedroom #4:			
Owner's Name					
Owner's Name  Owner's Mailing Address					
Owner's Name Owner's Mailing Address Street Address	City	State	Zip Code		
Owner's Name  Owner's Mailing Address  Street Address  Phone Number	City	State nergency Phone Number	Zip Code		
Owner's Name  Owner's Mailing Address  Street Address  Phone Number  Email Address	City		Zip Code		
Owner's Name  Owner's Mailing Address  Street Address  Phone Number  Email Address  Contact person for annual ins	City <b>En</b>		Zip Code		
Owner's Mailing Address  Street Address  Phone Number  Email Address  Contact person for annual institutions	City <b>En</b>	nergency Phone Number	Zip Code		
Owner's Mailing Address  Street Address  Phone Number  Email Address  Contact person for annual instance  Owner	City <i>En</i>	nergency Phone Number	Zip Code		
Owner's Mailing Address  Street Address Phone Number  Email Address Contact person for annual ins Owner Manage Manager's Name	City <i>En</i>	nergency Phone Number	Zip Code		
Owner's Mailing Address  Street Address  Phone Number  Email Address  Contact person for annual ins  Owner Manage  Manager's Name	City <i>En</i>	nergency Phone Number	Zip Code		
Owner's Mailing Address  Street Address Phone Number  Email Address Contact person for annual ins Owner Manage Manager's Name	City  En  spection  ger/Agent	ecify)			

**GENERAL INFORMATION** 

Credit Card

The signer(s) of this form does hereby state, warrant, certify and affirm the following:

- A. The information supplied to the City of New Buffalo on this document is true to the best of my knowledge;
- B. I understand and agree that all applicable fees must be paid and unit(s) pass inspection annually to continue renting this property;
- C. I consent to inspections of the dwelling unit by the city and will make the dwelling unit(s) available for inspection upon request;
- D. I understand the fee schedule adopted by the New Buffalo City Council (see attached Fee Schedule)
- E. I understand that expired Rental Certificates of more than 61 days will result in issuance of a civil citation if found to be operating and/or advertising without a valid certificate which may result in fines and/or possible revocation; and
- F. I understand that the rental unit is not considered a short-term rental and **WILL NOT** be rented, advertised for rent or sub-let for a period of less than **ONE YEAR (360 days)**.

I hereby affirm that I have truthfully completed this application to the best of my knowledge; that I have read Chapter 23 of the New Buffalo City Code of Ordinances; and that I agree to operate this rental in accordance with all Federal, State and local laws, ordinances, rules and regulations.

	Applicant's Printed Name	Applicant's Title		
	Applicant's Signature	Date of Birth	Date	
City	Use Only:			
Zoning District:		Date Received:		
Total number of occupants allowed:		Permit Number:		
Date	of initial Inspection			
Fees	(ALL FEES ARE NON-REFUNDABLE):			
	City Administration (Initial Inspection) - \$100 Rental Registration (Certificate of Rental Compliance) - \$75 Annual Inspection (Certificate of Occupancy) - \$150			
	Total Amount Due (\$325):			
Meth	od of Payment Cash Check			



# **Local Agent Designation and Authorization**

224 W. Buffalo Street New Buffalo, Michigan 49117

City Hall: 269-469-1500 Facsimile: 269-469-7917

www.cityofnewbuffalo.org

	Property Address:			
PROPERTY/OWNER INFORMATION	Property Code Number (Tax	(ID): 11-62		
	Owner's Name			
	Local Agent's Name			
RMATION	Mailing Address			
INFO	Street Address	City	State	Zip Code
LOCAL AGENT INFORMATION	Phone Number		Emergency Phone Number	
√201	Email Address			
New E proce: Buffal	Buffalo's ordinances and rules reg ss or other legal documents issue	ulating the rental unit iden d by the city in such matter	my behalf with regards to all duties partified above. This shall include acceps. Additionally, I agree that I will no be revoked and shall not be effective	oting service of notices, tify the City of New
Owne	r's Signature		Date	
Additi		e owner and the City of Ne	It the information provided is correct w Buffalo in the event of any change his rental unit.	
Local	Agent's Signature		Date	