

FOR OFFICE USE ONLY

Receipt Date _____

Payment Amt \$ _____

License # _____

Expiration Date _____

RENTAL HOUSING LICENSE APPLICATION
Continuation Sheet

FOR OFFICE USE ONLY LICENSE #	<u>STREET ADDRESS</u>	<u>UNIT/ APT #</u>	<u>CITY WATER/SEWER ACCOUNT #</u>	<u>TAX ACCOUNT ID#</u>	<u>CITY SECTION 8? Y/N</u>	<u>YEAR BUILT</u>	<u>MDE AFFECTED? Y/N</u>	<u>IF YES, MDE TRACKING/ OWNER#</u>	<u>IF YES, MDE INSP. CERT#</u>
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		
			- _____- _____		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N		