

✓ 2010 LICENSE APPLICATION

Single-Family Rental Property Each property address and dwelling unit must have its own application. Please complete all areas of application.					
PROPERTY ADDRESS		ZIP	PID NUMBER		
TYPE OF UNIT Single Family Condo/Townhome	☐ Duplex/Twinhome ☐ Group Home		☐ Homes With Services		
PROPERTY OWNER INFORMATION					
City must be notified in writing by current owner within 5 day	ys of any change of ow	nership or address.			
NAME (Owner, Partners, or Corporate Officers)					
ADDRESS (No PO Boxes)	CITY		STATE	ZIP	
HOME PHONE	CELL PHONE		WORK PHONE		
FAX	E-MAIL				
EMERGENCY INFORMATION					
EMERGENCY CONTACT NAME	PHONE		ALTERNATE PHONE		
ADDRESS (No PO Boxes)	CITY		STATE	ZIP	
MANAGER/CARETAKER INFORMATION (if applicable)					
City must be notified in writing by current manager within 5 days of any change in management.					
NAME (Management Company)	ment Company)		CONTACT NAME		
ADDRESS (No PO Boxes)	CITY		STATE	ZIP	
PHONE	CELL PHONE		FAX		
E-MAIL					

continued on reverse ⇒

VENDEE INFORMATION (Information about vendee if dwelling has contract for deed or mortgage.)						
NAME (Lender or Financial Institution Holding Mortgage)		PHONE				
ADDRESS (No PO Boxes)	CITY	STATE	ZIP			
2010 RENTAL PROPERTY LICENSE FEE						
\$100 License Fee Make check payable to City of Golden Valley.						
Mail to: Fire Department, Attn: Becky Perkins, 7800 Golden Valley Road, Golden Valley, MN 55427						
SIGNATURE						
I certify that the information provided is accurate and complete to the best of my knowledge.						
SIGNATURE OF APPLICANT			DATE			
DISCLAIMER						
License is granted on a provisional basis pending acceptable	inspection of property by a City official.		INITIAL HERE			

Staff Use Only

CHECK NUMBER DATE AMOUNT



