



SHORT TERM RENTAL REGISTRATION

RENTAL PROPERTY ADDRESS : _____

NUMBER OF DWELLING UNITS : _____ NUMBER OF BEDROOMS : _____

Property Owners Full Name: _____

Owners Address: _____

City: _____ State: _____ Zip: _____

Owners Birth Date: _____ Email: _____

Telephone: _____ Cell: _____

Signature: _____ **Date:** _____

I hereby certify that I am the owner, or land contract purchaser for the above rental or non-owner occupied property location. Application is hereby made for City of Muskegon Rental Dwelling Registration. Chapter 10 Article VI section 353 of the Muskegon Code of Ordinances requires periodic inspection of rental properties and payment of all fees.

Insurance Company Name: _____

Policy Number: _____ Expiration Date: _____

Sect. 10-351 (f) Dwelling Fire Insurance. "the city shall require dwelling fire insurance for all property owners who let for occupancy premises in the city" (1) Minimum coverage: Use of insurance proceeds. All property owners in the city shall be required to obtain a minimum of \$10,000 in dwelling fire insurance. (2) Property owners to provide city with insurance information. Effective 1/29/15

Responsible Party: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Telephone: _____

Responsible Party Signature: _____ **Date:** _____

Section 10-351(a) of the city's property maintenance code, "any owner who does not reside within thirty (30) miles of the city shall designate a responsible local agent who shall be legally responsible for operating such dwelling in compliance with the law, including this code".