CITY OF MINNEOLA
RENTAL PROPERTY OWNER – LICENSE APPLICATION

DATE _____

NAME OF BUSINESS/OWNER: _____ BUS PHONE #_____
_____Incorporated _____Partnership _____Fictitious Name _____Sole Proprietor/Person/Landlord

BUSINESS ADDRESS: _____ ZIP _____

MAILING ADDRESS: _____ ZIP _____

OWNER'S INFORMATION **(person who actually owns the property – this is where license will be mailed)**

PROPERTY OWNER: _____ PHONE # _____

HOME ADDRESS: _____ ZIP _____ FIN # _____

DL # _____ DATE OF BIRTH: _____

EMERGENCY CONTACT: _____ PH # _____

_____ NEW PROPERTY OWNER _____PROPERTY MANAGER

I AM THE OWNER OF THE FOLLOWING RENTAL PROPERTIES (list by address)

_____

_____

_____

_____

License Fee for multiunit buildings containing in excess of 5 units	$20.00/unit
License Fee for buildings containing 2 to 5 units	$30.00/unit
License Fee for single family dwelling	$50.00/unit

TOTAL # OF PROPERTIES _____ AMOUNT DUE $_____

I CERTIFY THE ABOVE INFORMATION IS CORRECT.

APPLICANT SIGNATURE _____ DATE _____

Licenses must be renewed each year by September 30th.

NOTIFY THIS OFFICE IMMEDIATELY IF YOU CHANGE YOUR NAME, ADDRESS, SERVICES, PHONE NUMBERS, OWNERSHIP, ETC.

FOR OFFICE USE ONLY

Check # _____ Cash $ _____ Received by _____ Date _____

License # _____ Date Issued _____ Issued by _____ Date _____