

CITY OF MINNEOLA

RENTAL PROPERTY OWNER – LICENSE APPLICATION

USE THIS FORM to make application for a Rental License Business Tax Receipt. This form may also be used to make changes to an existing license, such as a change in contact information, ownership or management of the dwelling.

ANNUAL FEES:

- License Fee for multi-unit 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

IMPORTANT: Licenses are renewed each year by Sept. 30th. Renewal payments received after that date are subject to Penalty Fees beginning Oct. 1st This application must be complete before issuing a license.

Type of Application: New _____ Renewal _____ Update/Changes _____

Property Owner of Record: _____

Mailing Address: City/State/Zip Code: _____

Telephone: _____ Cell: _____

Tax ID/SSN: _____ Email Address: _____

Driver's License: # _____ State _____ Expires _____ Date of Birth: _____

- Copy of Driver's License attached.

Property Management Company Name: _____

Property Manager/Title: _____

Mailing Address/City/State/Zip Code: _____

Telephone: _____ ext. _____ Tax ID/FEIN: _____

Email: _____ Website: _____

24-Hour LOCAL Emergency Contact:

Name: _____ Telephone: _____

Address of Rental Property: _____

Address of Rental Property: _____

Address of Rental Property: _____

- A separate page may be attached to list multiple properties.

I acknowledge that I have read this Rental Property Owner License Application. I further acknowledge my responsibility to advise the City of Minneola of any changes to contact information, ownership, or management as related to this license. I understand that as the Property Owner, I am responsible for any City code violations made by my tenants including property and landscape maintenance. I, the undersigned **Property Owner or Property Manager** do attest that the foregoing statements are true.

Applicant's Signature _____

Title _____

Date _____

FOR OFFICE USE ONLY

- Copy of Property Record Card attached.

CHECK# _____ Cash \$ _____ Received by _____ Date _____

LICENSE# _____ Date Issued _____ Issued by _____ Date _____

LICENSE# _____ Date Issued _____ Issued by _____ Date _____

LICENSE# _____ Date Issued _____ Issued by _____ Date _____

City of Minneola

"Central Florida's High Point"

P.O. Box 678, Minneola Florida 34755

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