



# DETACHED SINGLE-FAMILY RENTAL HOME

## 2026 REGISTRATION / PERMIT TO OCCUPY FORM

(REGISTRATION FEE - \$200, PERMIT TO OCCUPY - \$50 (TOTAL DUE \$250))

REGISTRATIONS NOT COMPLETED BY JANUARY 15, 2025, WILL INCUR A \$100 LATE FEE.

### PROPERTY INFORMATION

ADDRESS \_\_\_\_\_ SIDWELL (TAX ID) NUMBER \_\_\_\_\_

### OWNER INFORMATION

NAME \_\_\_\_\_ DRIVER'S LICENSE / STATE ID \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY / STATE / ZIP CODE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ CONTACT PHONE NUMBER \_\_\_\_\_

### RESPONSIBLE PARTY (IF PROPERTY OWNER IS A BUSINESS ENTITY)

NAME \_\_\_\_\_ DRIVER'S LICENSE / STATE ID \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY / STATE / ZIP CODE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ CONTACT PHONE NUMBER \_\_\_\_\_

### OWNER'S REPRESENTATIVE / LEGAL AGENT (IF APPLICABLE)

NAME \_\_\_\_\_ CITY / STATE / ZIP CODE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CONTACT PHONE NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

### TENANT INFORMATION

NAME \_\_\_\_\_ DRIVER'S LICENSE / STATE ID \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY / STATE / ZIP CODE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ CONTACT PHONE NUMBER \_\_\_\_\_

I HEREBY APPLY FOR A RENTAL HOME REGISTRATION UNDER CITY OF AUBURN HILLS ORDINANCE NO. 19-901 AND DO CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND ACCURATE AND THAT I AM THE **LEGAL OWNER OR LEGAL REPRESENTATIVE/AGENT** OF THE PREMISES AT THE ABOVE LOCATION.

\_\_\_\_\_  
PROPERTY OWNER (PRINTED)

\_\_\_\_\_  
OWNER'S REPRESENTATIVE (PRINTED)

\_\_\_\_\_  
PROPERTY OWNER (SIGNED)

\_\_\_\_\_  
OWNER'S REPRESENTATIVE (SIGNED)