

# RESIDENTIAL RENTAL PROPERTY REGISTRATION CITY OF MACOMB, IL

For Registration Year \_\_\_\_\_

**DO NOT SEPARATE FORMS**

Parcel ID No: \_\_\_\_\_

Property Address: \_\_\_\_\_

Total number of individual dwelling units: \_\_\_\_\_

_____ Single Family	_____ Tri-Plex	_____ Apartment Building
_____ Duplex	_____ Four-Plex	_____ Manufactured Home
_____ Other: Specify: _____		

Total number of bedrooms per unit: \_\_\_\_\_

\_\_\_\_\_

Numbering system for multiple unit/apartment structures: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Property Owner: \_\_\_\_\_

Owners Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Owners who reside more than 50 miles from Macomb must have a property manager.

Local Property Manager Name: \_\_\_\_\_

Local Property Managers Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Registration Fees (per unit): Total number of units \_\_\_\_\_ x <sup>22</sup>\$18 = \$ \_\_\_\_\_

If registering after July 1st, payment is \$9 per unit.

Applicant Signature	City Representative
Date	Date

**For Office Use Only:**

Zoning: \_\_\_\_\_ Occupancy: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_