CITY OF
mentor
8500 Civic Center Boulevard, Mentor, Ohio 44060-2499 • (440) 255-1100 • www.cityofmentor.com

## APPLICATION FOR RENTAL CERTIFICATE

PLEASE COMPLETE THE FOLLOWING INFORMATION:

RENTAL ADDRESS: $\qquad$ NUMBER OF UNITS: $\qquad$

PROPERTY OWNER INFORMATION:

Name: $\qquad$

Address: $\qquad$

City, State, Zip: $\qquad$
Phone Number: $\qquad$ Cell Phone Number: $\qquad$

Fax: $\qquad$ E-mail Address: $\qquad$

Your Name
Signature
Date

Who would you like the city to contact to Schedule the Rental Inspection (If different from above):

## Tenant $\square \quad$ Legal Agent $\square$ <br> Real Estate or Management Company $\square$

Name: $\qquad$
Address: $\qquad$
City, State, Zip: $\qquad$
(Area Code) Phone Number: $\qquad$ Email address:

Relationship to Owner: $\qquad$

Please return application and applicable fees (listed below) with a check payable to:
City of Mentor, Department of Planning \& Development, 8500 Civic Center Boulevard, Mentor, OH 44060
If this is a HUD Section 8 property, check this box $\square$, mail the form back and DO NOT send a payment.
Condominium: \$50
Single Unit Fee: \$100
Duplex Fee: $\$ 150$
Triplex Fee: $\$ 200$
Re-inspection fee: $\$ 20 \quad$ *Note: Each re-inspection will be charged at $\mathbf{\$ 2 0 . 0 0}$ each occurrence.

FOR OFFICE USE ONLY

Fee Amount Paid $\qquad$

