

unit



## APPLICATION FOR MULTI-FAMILY RENTAL CERTIFICATE

Name of Complex		
Location		
Name of Owner		
Address of Owner		
Phone No		Email
Name of Contact Person		
(Person to assist in providing Address of Contact Person	· · ·	
Phone No		Email
Number of Units		
		Fees and Deposit
Multi-family units (more that Inspection Fees:	n 3 units)	
Number of Units X \$20 =	\$	
Building and Grounds =	\$ <u>20.00</u>	_
Deposit:		
Number of Units X \$10 =	\$	_
Total =	\$	_
** If the number of units has	changed, please	adjust the fee and deposit amounts accordingly.
Note: If re-inspections are re	equired, the follo	wing will be deducted from the deposit:
•	•	ing unit plus \$10.00 for reinspection of each additional dwelling

\$20.00 for reinspection of each building exterior premises or complex

Please return application and applicable fees with a check payable to: City of Mentor, Department of Planning & Development, 8500 Civic Center Boulevard, Mentor, OH 44060