



Rental Housing License Application
(ONE APPLICATION PER RENTAL PROPERTY)



Rental Property Information

Site Address:

Complex Name (if multi-family):

☐ Single Family ☐ Townhome ☐ Duplex ☐ Triplex ☐ Quadplex ☐ Apartment ☐ Condo

Total Number of Units:

Number of Paved, Off-Street Parking Spaces:

Property Owner Information

Owner:

☐ Sole Proprietor/LLC ☐ Corporation

Tax Identification Number (if multi-family):

Name(s) of Partners/Corporate Officers:

Mailing Address:

Phone:

Cell Phone:

E-mail:

Management or Agent Information

Name of Registered Agent:

Name of Company:

Mailing Address:

Phone:

Cell:

E-mail:

Primary Contact

☐ Owner ☐ Management or Agent

Preferred Method of Contact: ☐ Email ☐ US Postal Mail ☐ Phone Call

Rental Status

☐ New License ☐ Transfer ☐ Renewal ☐ Licensed Facility (include license) ☐ Sold – Owner/Occupied

Who is Allowed to Schedule an Inspection?

- ☐ Tenant
- ☐ Owner
- ☐ Management
- ☐ Agent

I, the owner of this parcel, certify these are the people allowed to schedule an inspection.

Owner Printed Name

Owner Signature

Date

Fees

Single Family, Townhome, Condo, Duplex, Triplex - \$160.00 per unit
Multi-Family (4+ units) - \$250.00 per building plus \$65.00 per unit
Reinspection Fee (after initial inspection and one follow-up inspection) - \$100.00 per inspection
Point of Conversion Fee - \$375.00

Note: One license *per building address* according to City Code

Acknowledgements (please check all that are complete)

- ☐ I declare under the penalties of perjury and criminal for willfully making a false statement that this application is, to the best of my knowledge and belief, true, correct, and complete.
- ☐ I, the owner, acknowledge to receive all information regarding the rental property.

DATA PRIVACY NOTICE

The data you have supplied on this form will be used to assess your qualifications for a rental license. You are not legally required to provide this data, but we will not be able to grant the license without it. If a license is granted, the data you have supplied will constitute a public record and copies may be issued to anyone requesting them. The required data allows us to distinguish you from other applicants; to identify you in our license files; to verify that you are the person who applied for the license; to contact you if additional information is required; and to determine if any conviction you may have on record might affect your suitability as a license holder. Your address and phone number listed is considered public data.

CERTIFICATION

I certify the information contained in this form is true to the best of my knowledge; that I have read and understand the conditions under which my rental license may be suspended or revoked according to [Chapter 253, Rental Dwellings of the City of Isanti](#); and that the rental property being licensed complies with applicable codes and ordinances. I hereby agree to notify the Rental Operator within 5 days of any changes in ownership or type of occupancy.

Printed Name

Signature

Date

Payment for your license is due upon receipt of the application. Checks are the preferred method of payment. Please make all checks payable to the *City of Isanti* and return the payment and application to the City of Isanti at 110 1st Ave NW Box 428 Isanti, MN 55040. If you desire to pay by credit card, please contact the City of Isanti directly at 763-444-5512 and email the application to jcurtis@cityofisanti.us.