



## CITY OF DUNCANVILLE RESIDENTIAL RENTAL PROPERTY REGISTRATION FORM

Address of Rental Unit \_\_\_\_\_

Total Dwelling Square Footage (SF) \_\_\_\_\_ Number of Bedrooms \_\_\_\_\_

Bedroom 1 SF \_\_\_\_\_ Bedroom 2 SF \_\_\_\_\_ Bedroom 3 SF \_\_\_\_\_ Bedroom 4 SF \_\_\_\_\_ Bedroom 5 SF \_\_\_\_\_

*\* If bedroom SF is unknown, we will assume a max occupancy of 2 people per bedroom.*

Please Select One: \_\_\_\_\_ Annual Registration \_\_\_\_\_ Change of Ownership \_\_\_\_\_ Change of Tenant

### OWNER INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

1) If owned by a partnership please list name, address and phone number of each partner **or**

2) If owned by a corporation, please list state/country of registration, mailing address, business location, phone number, individual in charge of office and names of all directors

\_\_\_\_\_  
\_\_\_\_\_

### PROPERTY MANAGER INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### TENANT INFORMATION *Confirm tenant name matches UB records.*

Is the unit currently occupied? (Check One) Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, please list the name of the primary tenant and the number of occupants below.*

Name \_\_\_\_\_ # of Occupants \_\_\_\_\_

**Signature** *Please retain a copy for your records*

**Date** \_\_\_\_\_

Signature of Owner/Agent \_\_\_\_\_ Print Name \_\_\_\_\_

*A \$25 registration fee is due upon submittal of registration and a \$50 inspection/RCO fee is due prior to scheduling your inspection. This application constitutes consent of the property owner/manager/agent for the City of Duncanville to perform all required interior and exterior inspections of this property. The signatory does hereby represent that all of the information is true and correct; any false information may result in withdrawal of the application and may result in criminal charges.*