

**City of Melvindale**  
**Department of Building and Safety**  
**3100 Oakwood Boulevard**  
**Telephone: 313-429-1060**

**MULTIPLE RENTAL PROPERTY REGISTRATION**

Complex Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_

Business Form (Check One): Corporation \_\_\_\_ Partnership \_\_\_\_ Sole Proprietor \_\_\_\_ LLC \_\_\_\_

Submit copies of : Articles of Incorporation, Partnership Agreement, Assumed Name Certificate, or LLC, Management Agreement, with names and addresses of all legally responsible persons.  
*Also for corporations and LLC entities, submit copy of State of Michigan annual report.*

Building _____	Number of Units _____	Building _____	Number of Units _____
Building _____	Number of Units _____	Building _____	Number of Units _____
Building _____	Number of Units _____	Building _____	Number of Units _____
Building _____	Number of Units _____	Building _____	Number of Units _____
Building _____	Number of Units _____	Building _____	Number of Units _____

**Total Number of Units:** \_\_\_\_ x **\$2.00 per unit** = \_\_\_\_ + **\$25.00 Registration** **TOTAL FEE:** \_\_\_\_\_

**Legal Owner**

**Responsible Local Agent**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Business Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Home Phone \_\_\_\_\_

Home Phone \_\_\_\_\_

Drivers Lic. # \_\_\_\_\_

Drivers Lic. # \_\_\_\_\_

Or F.E.I.N.

Date of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_

I fully understand the registration requirements, and implications required by Code of Ordinance 514, Sections 5-301 thru 5-318, pertaining to owning and renting of dwelling units and further agree that all notices, correspondence, violations and citations, as well as any other legal documents, may be served either to the owner or responsible local agent; and further agree to notify the Building Department upon the sale or transfer of the property, or change of responsible local agent; and further to comply with all ordinances and inspection requirements of the City of Melvindale, and to pay all associated fees and obtain a Certificate of Compliance as required.

Legal Owner:

\_\_\_\_\_

Signature

Responsible Local Agent

\_\_\_\_\_

Signature