



RENTAL HOUSING REGISTRATION RENEWAL

RENEWAL

(Complete this renewal once every three years)

Rental Property Address _____ # of Units _____

List each unit number (i.e 1A and 1B) _____

OWNER INFORMATION

Name: _____ Phone/Cell : _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Please provide your email so we can use this for routine notifications.

RESPONSIBLE LOCAL MANAGER
(If different than Owner)

This person is authorized to act on behalf of the owner concerning all matters of compliance with local ordinances and to receive all communications from the City and to respond on behalf of the owner.

Name: _____ Phone/Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

CHECK ALL THAT APPLY

- NO changes to the dwelling units from previous self-inspection forms.
- Included are the updated self-inspection forms to reflect changes since previous self-inspection forms were filled out.
- Add owner and/or manager’s name, phone number and email address to a Landlord Database for prospective tenants looking for available rental units.

(NOTE: If renewal is more than 30 days past due, a new registration fee will be assessed at \$20 per structure plus \$3 per unit).

Send completed forms to:

**City of Waverly
Zoning Office
PO Box 616
Waverly, IA 50677
OR
zoning@waverlyia.com**

Signature of Owner or Responsible Local Manager (Required) Date

*I certify that this information is true and complete to the best of my knowledge and that I have read a copy of the City of Waverly, Rental Housing Code provided on our website at www.waverlyia.com/rental.

For Office Use Only: Permit # _____ - _____ Previous complaints: _____

____ Approved OR ____ Denied By: _____ Date: _____