

Annex	CUP	Home Occ.	Interim Use	Move Building	Non – Conform	Plan Consid.	PUD	Variance
Driveway	Land Excavation	Land Fill	Rental		ROW	Sign		



City of Belle Plaine
 218 N. Meridian Street
 P.O. Box 129
 Belle Plaine, MN 56011

Community Development Department
 Building Official, Scott McCarty
Phone: 952-873-5655
Fax: 952-873-5509

RENTAL DWELLING LICENSE APPLICATION Two Year License	Permit Number: _____
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SELECT APPROPRIATE DWELLING DESIGNATION:

- | | | | |
|--|-----------------|---|-------------------------|
| <input type="checkbox"/> NEW Single Family Dwelling | \$100.00 | <input type="checkbox"/> NEW Multi Unit Dwelling | \$75.00 per unit |
| <input type="checkbox"/> RENEWAL Single Family Dwelling | \$75.00 | <input type="checkbox"/> RENEWAL Multi Unit Dwelling | \$50.00 per unit |

RENTAL SITE	Address: _____	Belle Plaine, MN	P.I.N: _____
Number of Units: _____	Year Site Became Rental: _____	Rent per Month: \$ _____	
OWNER	Name: _____	Phone: _____	

Address: _____

IMPORTANT INFORMATION REGARDING RENTAL LICENSING:

- A RENTAL DWELLING LICENSE HAS NOT BEEN CREATED OR RENEWED UNTIL AN INPSECTION HAS BEEN CONDUCTED AND PASSED BY THE CITY BUILDING INSPECTOR.
- Application and payment must be submitted prior to scheduling an inspection.
- A rental dwelling license expires two (2) years after issue date.
- It is the responsibility of the property owner to ensure that the rental license is renewed prior to the expiration date.
- All water and sewer service accounts shall be the responsibility of the property owner unless the owner informs the City in writing that the account shall be carried in the name of another person. In any case, the owner shall remain liable for water supplied to the owner's property, whether the owner is occupying the property or not, and any charges unpaid shall be assessed to the property tax statement and be a lien on the property. (City Code 700.05 Subd. 2)

I certify that I am the property owner and/ or agent on behalf of the property owner named above; that I have familiarized myself with the rules and regulations with respect to preparing and filing this application that the foregoing statements and answers herein contained are in all respects true and accurate to the best of my knowledge and behalf.

OWNER'S SIGNATURE _____ **DATE:** _____

OFFICE USE ONLY

Date Received: _____	Permit fee: \$ _____	Form of Payment: _____
Comments: _____ _____	Other: \$ _____	Date Issued: _____
	Total Due: \$ _____	Transaction Number: _____
		Issued By: _____
Building Official or Designee: _____		Date: _____
Zoning Administrator or Designee: _____		Date: _____